

**Acquired Brain Injury
Resource Guide to
Programs and Services in Kentucky
September 2000**



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and Mental Retardation Services
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About the Kentucky Acquired Brain Injury Resource Guide

The Resource Guide project was designed to assess, document and disseminate information on publicly funded programs available to help meet the needs of people with brain injuries for services and supports. Lists of agencies that provide services and supports for people with brain injury in Kentucky were compiled. An interview format was developed to obtain information from agencies of interest. The interview consisted of 12 questions (see page 102). Interviews were scheduled and conducted with key contacts in selected publicly funded programs providing services and supports to people with disabilities in Kentucky. Information was gathered about eligibility requirements, services, waiting lists, and application procedures.

It was not the intent of this project to document all the available facilities that might be helpful to people with acquired brain injuries and their families, but rather to develop a guide to many resources available to people with disabilities, including brain injuries. The scope of the Resource Guide was limited to the identification of statewide resources, programs and supports available to help people with brain injuries remain in their own homes and communities. Educational resources are not included in the Resource Guide. Please consult local public school board offices for information about special education or other educational resources.

The Resource Guide is intended for use by case managers who complete assessments and plan community-based services with interdisciplinary teams members or with people with brain injuries and their families. Summary information and more complete program descriptions are provided to assist with this process.

How to Use this Resource Guide

This Resource Guide document is organized into sections. The first section is **Summary of Program Services and Eligibility**. This section summarizes twenty (20) programs that completed interviews by indicating service categories that are provided by each program. Additional summary information is provided listing each program and the specific services defined in the program description sections.

Four (4) Kentucky brain injury specific programs and nineteen (19) programs other programs available to people with disabilities are included. These program descriptions contain service definitions, service limitations, eligibility requirements, and contact information.

Services at a Glance offers a listing of fifty-three (53) service categories and indicates which services each of the selected programs provides. The abbreviation, program name, and page number where a complete description of the program may be found are found on page 10. A description of four (4) programs that provide **Flexible Funding Sources** for needed services and supports for eligible participants follows. These four (4) programs are the payers of “last resort”. These resources may be used when all others have been exhausted.

This is followed by a **Summary of Eligibility Requirements** for the programs listed in the Resource Guide. The eligibility requirements specify the criteria for qualifying for each program. **The reader is advised to consult program staff directly to further facilitate service planning and eligibility determination.**

The second section provides narrative **Program Descriptions**, eligibility requirements, definitions of services, and contact information for the four (4) Brain Injury Specific Programs.

The third section provides narrative **Program Descriptions for Other Resources** that people with acquired brain injuries may be qualified to receive. This format is similar as the one listed above, listing a program description, eligibility requirements, service definitions, and contact information.

The fourth section provides information on **Additional Resources**. These resources are available to help meet many unique service needs including interpreter services for the hearing impaired, legal services, domestic violence services, transportation, housing, disability income, and food stamps.

Finally, there is a listing of telephone numbers and web sites found throughout the Resource Guide. This easy reference provides contact information for each program.

Abbreviations

ABI means Acquired Brain Injury Medicaid Waiver Program (See page 19)
AMH means Adult Mental Health (See page 30)
BIAK means Brain Injury Association of Kentucky (See page 22)
Blind means Department for the Blind (See page 43)
CCSHCN means Commission for Children with Special Health Care Needs (See page 38)
CMH means Children's Mental Health (See page 34)
CPC means Carl D. Perkins Comprehensive Rehabilitation Center (See page 24)
EPSDT means Early Periodic Screening, Diagnosis and Treatment Special Services (See page 47)
1st Steps means First Steps (See page 48)
H&C means Home and Community-based Waiver Program (See page 51)
Home means Homecare Program (See page 54)
IMP means Interagency Mobilization for Progress in Adolescent and Children's Treatment (IMPACT) (See page 56)
IMP+ means IMPACT Plus Program (See page 58)
KATSN means Kentucky Assistive Technology Services Network (See page 63)
KCHIP means Kentucky Children's Health Insurance Program (See page 65)
MADD means Mother's Against Drunk Driving (See page 67)
PCA means Personal Care Attendant Program (See page 68)
SA means Substance Abuse Program (See page 70)
SupLiv means Supported Living Program (See page 73)
SCL means Supports for Community Living Program (See page 76)
TBI means Traumatic Brain Injury Trust Fund Benefit Management Program (See page 26)
VocReh means Department of Vocational Rehabilitation (See page 45)

Other Flexible Funding

These programs offer flexible funding support and may be utilized for individualized, wrap-around services that are needed to help people who have acquired brain injuries and other disabilities live in the community. There are certain restrictions and eligibility requirements for these programs. These funding sources may be accessed if the services requested are not otherwise covered.

Traumatic Brain Injury (TBI) Trust Fund Benefit Management Program (see page 26)

This program offers assistance to persons with brain injuries in obtaining community based services and supports. This program may also be used to assist in obtaining individualized wrap-around services. Per legislation governing the fund, it may not be used to pay for institutionalization, hospitalization, or medication.

Early Periodic Screening Diagnostic and Treatment Special Services (EPSDT) (see page 47)

Early Periodic Screening Diagnostic and Treatment Special Services are other health care, diagnostic services, preventive services, rehabilitative services, treatment or other measures described in 42 USC Section 1396d(a), that are not otherwise covered under the Kentucky Medicaid Program and are medically necessary to correct or ameliorate defects and mental and physical illnesses and conditions.

Kentucky IMPACT (Interagency Mobilization for Progress in Adolescent and Children's Treatment) (see page 56)

IMPACT helps create and coordinate services that allow a child with an emotional disability to receive care at home or in the community. IMPACT coordinates services between Kentucky's five child-serving systems: education, health, social services, mental health, and the courts.

Supported Living Program (SupLiv) (see page 73)

Supported Living means providing people with disabilities the individualized help they need to live successfully in a home of their choice. The types of services and benefits that may be funded by the Supported Living program include, but are not limited to, home modifications, personal care attendant, respite, help with home purchase or upkeep, skill development, transportation, automotive modification, therapy, and assistive technology.

Summary of Eligibility Requirements

The following are eligibility summaries for twenty-three (23) programs that provide services and supports for people that have sustained brain injuries and their family members in Kentucky. The program eligibility summaries below are listed in the order that they appear on the service grid. The abbreviation in parenthesis of each program title is also used on the service grid to designate each program. For more information regarding each program please refer to the individual program descriptions.

Acquired Brain Injury (ABI) Waiver Program

People are eligible if they:

- Are between the ages of 21 and 65 years
- Meet nursing facility level of care
- Have a primary diagnosis of an acquired brain injury
- Exhibit cognitive, behavioral, motor or sensory damage with a potential for rehabilitation and retraining
- Have a rating of a least four (4) on the Rancho Los Amigos Level of Cognitive Function Scale
- Are realistically expected, upon discharge from the program to remain in the community setting with existing community resources
- People must be eligible for Medicaid
- People who receive Social Security Income or Social Security Disability Income are presumed to be financially eligible
- Individuals whose income does not exceed 300% of the Social Security Income standard may also be financially eligible

Brain Injury Association of Kentucky (BIAK)

- People of all ages are eligible if they have been affected by brain injury
- Family members receive information and support services

Carl D. Perkins Comprehensive Rehabilitation Center (CPC)

- Consumers of the Department of Vocational Rehabilitation are eligible for residential services
- A person must have a physical or mental impairment which results in a substantial impediment to employment
- A person must be able to benefit in terms of an employment outcome
- A vocational rehabilitation counselor determines eligibility and sends a referral to the CPC staff for consideration
- Decision to accept a consumer into the CPC is based on the individualized need for services provided and the availability of needed services.

Traumatic Brain Injury (TBI) Trust Fund Benefit Management Program

- Applicants of all ages shall have partial or total disability caused by injury to the central nervous system from physical trauma, damage to the central nervous system from anoxia (total deprivation of oxygen), hypoxic (decreased oxygen supply to tissues) episodes, allergic

conditions, toxic substances, or other acute medical incidents resulting in impaired cognitive abilities or impaired physical functioning

- Applicants must have no other viable funding source for needed services
- Several conditions are excluded:
 - Strokes that can be treated in nursing facilities providing routine rehabilitation services
 - Spinal cord injuries for which there are no known or obvious injuries to the central nervous system
 - Progressive dementias and other mentally impairing conditions
 - Depression and psychiatric disorders in which there is no known or obvious central nervous system damage; mental retardation and birth defect related disorders of long standing nature; and
 - Neurologically degenerative, metabolic, and other medical conditions of a chronic, degenerative nature.

Adult Mental Health Services (AMH)

- Eligibility is determined by the diagnostic interview conducted by a qualified mental health professional
- People aged 18 years and older are eligible
- The person's diagnosis must be consistent with the Diagnostic and Statistical Manual of the American Psychiatric Association
- Families share in the cost of this program based on the sliding scale in each region determined by the number of family members and household income

Children's Mental Health Services (CMH)

- Eligibility is determined by the diagnostic interview conducted by a qualified mental health professional
- People aged 17 years and younger are eligible
- The child's diagnosis must be consistent with the Diagnostic and Statistical Manual of the American Psychiatric Association
- Families share in the cost of this program based on the sliding scale in each region determined by the number of family members and household income

The Commission for Children with Special Health Care Needs (CCSHCN)

Applicants for service must be:

- Residents of Kentucky
- Must be between the ages of birth and twenty-one (21) (Exception: adults with Hemophilia)
- Must have a condition usually responsive to medical treatment that falls within one of the listed diseases or conditions (see page 38 for the program description)
- Family must meet financial eligibility guidelines based on income. (Family income must be at or below 200% of the Federal Poverty Level. Families with higher income levels are offered a sliding fee scale from 20% to 100% financial participation.)

Crime Victims Compensation Board (Crime Vic)

- Any person (all ages) who is an innocent victim of a criminal act, including victims of drunk drivers, and who suffered bodily or psychological injury or death or lost earnings or support as a result of a crime is eligible
- The victim must report the crime to the proper authorities within 48 hours, and must cooperate with law enforcement agencies
- The victim must qualify under the Board's definition of financial hardship
- The victim cannot be a person who was in jail or in an institution run by the Cabinet for Human Resources at the time of the crime
- A victim of a drunk driving crash who was not a passenger of the drunk driver is eligible

Department for the Blind (Blind)

- People aged 14 years and older who are visually disabled such that a substantial impediment to employment exists and vocational rehabilitation services are necessary to help the individual prepare for, enter, engage in or retain gainful employment are eligible
- The visual disability must be determined by an eye examination performed by an ophthalmologist or optometrist of the individual's choice
- Medical, vocational, work adjustment and educational evaluations may be utilized to determine eligibility and to determine which services will be of benefit

Department of Vocational Rehabilitation (VocReh)

- A person who has a physical or mental impairment which constitutes or results in a substantial impediment to employment and who can benefit in terms of an employment outcome from vocational rehabilitation services may qualify
- People who receive Social Security Disability or Supplemental Social Security benefits for a disability are presumed to be eligible for services
- There are no upper or lower age limits although the individual must be of employable age by the time rehabilitation services have been completed.
- A vocational rehabilitation counselor determines eligibility
- People with visual impairments are served by the Department for the Blind

Early Periodic Screening Diagnostic and Treatment Special Services (EPSDT)

Children are eligible who:

- Are age twenty-one (21) or under that are eligible for Medicaid who meet the criteria for medical necessity as determined by the Health Care Review Organization and
- Require medical services not covered by the Medicaid State Plan

Materials that must accompany an EPSDT application are:

- A physician's order (on a prescription pad)
- A letter of medical necessity from the physician, physical therapist or other qualified personnel. This letter should include a patient history, a diagnosis and prognosis, a medical justification for each item, a thorough description of the benefit to the patient, and the length of time the patient will need the item
- Product information, and
- Prices from different providers with comparable products that might fit the person's needs

First Steps (1st Steps)

- Children from birth to age three (3) who have a developmental delay or a particular medical condition that is known to cause developmental delay
- Eligibility is determined by the evaluation of developmental delay, or the medical diagnosis of established risk conditions (i.e. shaken baby syndrome, bacterial or viral meningitis, etc.)
- Families share in the cost of this program based on a sliding fee scale determined by the number of family members and household income.

Home and Community-based Waiver (H&C)

- Medicaid recipients (all ages) who are currently residing in a nursing facility are eligible to receive Home and Community-based Services upon discharge to avoid reinstitutionalization
- A physician must certify that if Home and Community-based Services were not available, the physician would order nursing facility care for the individual under the physician's care

Homecare Program (Home)

- Recipients must be at least sixty (60) years old and at risk of going into a nursing home or be a person in a nursing home who could go home if assisted
- Each applicant shall file an application for participation and demonstrate that the individual is sixty (60) years of age or older and meets at least one (1) of the following criteria:
- The applicant has functional limitations that require a sheltered environment with the provision of social and health related services specific to the individual's activities of daily living (i.e. feed, bathe, dress, transfer, and toilet oneself) and who has been determined impaired in at least two (2) physical activities of daily living or three (3) instrumental activities of daily living (i.e. shopping, budgeting, meal preparation, laundry, cleaning, taking prescribed medication); and/or
- The applicant has a stable medical condition requiring skilled health services along with services related to activities of daily living requiring an institutional level of care; and/or
- The applicant is currently residing in a skilled nursing facility, an intermediate care facility or a personal care facility and can be maintained at home if appropriate living arrangements and supports can be established

Kentucky IMPACT (Interagency Mobilization for Progress in Adolescent and Children's Treatment)

- Children must meet all the following requirements:
 - Be under eighteen (18) years of age
 - Have a diagnosed psychiatric disorder (diagnosis of chemical dependency, mental retardation or organic brain disorder may be present but cannot be the primary diagnosis)
 - Be severely limited in at least two (2) of the following areas: self-care, interpersonal relationships, family life, self-direction, and/or education
 - Have been disabled for a year or judged by a qualified mental health professional to be at high-risk to continue in the disability for a year or more without intervention
 - Require service coordination and service planning from two (2) or more agencies at the same time

- Priority will be given to children who are currently living outside their homes, children who are at risk of being placed in a hospital or treatment facility, and/or children with a history of placements in a hospital or treatment facility

IMPACT Plus (IMPACT+)

- A Medicaid recipient under twenty-one (21) years of age who is in the custody or under the supervision of the state or at risk of being in the custody of the state and
- Meets one (1) of the following:
 - Is in a hospital or psychiatric residential treatment facility and would be at risk for reinstitutionalization if discharged
 - Is at risk of institutionalization
 - Has been determined by the Department for Medicaid Services to be at risk for institutionalization
 - A recipient is designated as at risk of institutionalization if the individual:
 - Has been individually assessed by a qualified behavioral health professional and determined to require immediate short-term residential crisis stabilization; or
 - Has a severe, persistent, clinically significant behavioral health disorder, other than mental retardation, dementia, or a personality disorder, listed in the “Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition Text Revision” or the replacement revision of such, published by the American Psychiatric Association; and
 - Has documentation of a severe behavioral health problem that persisted in the home, school, or community setting during the past six (6) months; and
 - Requires a coordinated plan of medically necessary community-based behavioral health services, in the absence of which there would be a substantial likelihood that the individual would require extensive institutionalization for behavioral health services
 - A recipient shall be considered no longer at risk of institutionalization and not eligible for IMPACT Plus services if:
 - A determination has been made by a qualified behavioral health professional that the only service required was immediate short-term residential crisis stabilization, and a period of residential crisis stabilization was provided, and the recipient no longer required such service, or ten (10) days of residential crisis stabilization has been provided, whichever occurs first
 - The recipient no longer meets the criteria for “at risk of institutionalization”.

Kentucky Assistive Technology Services Network (KATSN)

- People of all ages with disabilities who need to maintain, improve or increase functional capacities

Kentucky Children’s Health Insurance Program (KCHIP)

- Family income must be at or below 200% of the Federal Poverty Level
- The child (birth to age 18) must not already have health insurance
- The family has not voluntarily dropped health insurance on the child within the past six (6) months
- Please note: when the Department for Community Based Services determines eligibility for KCHIP, they first consider if the child is eligible for Medicaid. (Medicaid covers children birth

to one (1) year who are 185% poverty or below, ages 1-5 years at 133% poverty or below, and ages 6-18 at 100% of poverty or below.)

Mothers Against Drunk Driving (MADD)

- Citizens who are concerned with the impact of impaired driving on individuals and communities and are called to action

Personal Care Attendant Services Program (PCA)

- Eligible applicants must be eighteen (18) years of age or older
- Be severely physically disabled (i.e. functional loss of 2 or more limbs)
- Need not less than fourteen (14) hours of attendant care per week or need an attendant overnight
- Reside, or through this program be able to reside, in a non-institutional setting
- Participate in the eligibility determination with the evaluation team
- Be mentally capable of recruiting, hiring, firing, and suspending attendants
- Agree that the need for continuing attendant care shall be subject to an initial evaluation and re-evaluations at yearly intervals
- Work with personal care coordinator in establishing a personal care plan to guide attendants responsibilities
- Be capable of preparing attendant payroll reports and required employer tax statements

Substance Abuse Program (SA)

- Any person (all ages) who is considered at risk of developing a substance abuse related problem is eligible for substance abuse prevention services
- People who have been identified as misusing drugs and/or alcohol are eligible for early intervention services (i.e. student assistance programs, driving under the influence programs, or employee assistance programs)
- People who are determined to have a diagnosis of substance abuse or substance dependence are eligible for treatment
- Families share in the cost of this program based on the sliding scale in each region determined by the number of family members and household income

Supported Living Program (SupLiv)

- Kentuckians of all ages who qualify for the Americans with Disabilities Act are eligible to apply for Supported Living assistance

Supports for Community Living Program (SCL)

People are eligible if:

- They have mental retardation or developmental disabilities and
- They meet the requirements for residence in an Intermediate Care Facility for persons with mental retardation or other conditions (ICF/MR), and
- They meet eligibility requirements for the Medicaid Program
- The onset of the disability occurred before age twenty-two (22) years.

Program Descriptions

Programs for People with Acquired Brain Injuries

Acquired Brain Injury (ABI) Medicaid Waiver Program.

The objective of the ABI Medicaid Waiver Program is to assist people with acquired brain injuries, who have a potential for rehabilitation and reintegration into the community, and who can live in the community with the assistance of existing community resources once waiver services have ended.

The definition of acquired brain injury is an injury with structural, non-degenerative brain damage. This injury is one that is not hereditary, congenital, or degenerative, and it is an injury that occurs after birth. Injuries within the scope of benefits may include: central nervous system injury from a physical trauma; central nervous system damage from an anoxic or hypoxic episode; or central nervous system damage from an allergic condition, toxic substance or another acute medical incident. Acquired brain injury does not include strokes treatable in nursing facilities providing routine rehabilitation services, spinal cord injuries in which there are no known or obvious injuries to the intracranial central nervous system, progressive dementia, depression and psychiatric disorders, mental retardation and other birth defect related disorders and conditions which cause the person to pose an unmanageable level of danger to the community.

Eligibility

People are eligible if they are between the ages of twenty-one (21) and sixty-five (65) years; meet nursing facility level of care; have a primary diagnosis of an acquired brain injury; exhibit cognitive, behavioral, motor or sensory damage with a potential for rehabilitation and retraining; have a rating of at least four (4) on the Rancho Los Amigos Level of Cognitive Function Scale; are realistically expected, upon discharge from the program, to remain in a community setting with existing community resources; and for whom the provision of ABI Waiver services are cost-effective compared to appropriate nursing facility and nursing facility/brain injury services. People must also be eligible for Medicaid. Individuals whose income does not exceed 300 percent of the SSI standard may also be eligible. People may apply to the program by contacting the Brain Injury Services Unit. A comprehensive plan of care is then developed with the participation of the individual, the case manager, other providers, and members of the person's family and/or social support network. People remain eligible if they continue to progress and continue to meet nursing facility level of care.

Service descriptions

"Case management"- making use of functional assessments, the case manager shall be responsible for leading in the development of an overall plan of care. Services are to be identified which will assist the person gain access to needed waiver and other Medicaid State Plan services, as well as needed medical, social, educational resources, regardless of the funding source. Case management includes ongoing monitoring of service provision and referral to other service providers, as necessary. The case management provider shall be responsible for ensuring the overall health, welfare, and safety of participants.

“Personal care services”- assistance with eating, bathing, dressing, personal hygiene, activities of daily living and includes the retraining of the individual in the performance of these activities. May include other activities which are essential to the recipient’s health and welfare.

“Respite care”- services provided on a short-term basis to address the absence or need for relief of those persons normally providing the care. This shall not exceed 168 hours in a 6 months period.

“Environmental modifications”- those physical adaptations to the home, which are necessary to ensure the health, welfare, and safety of the individual, or which enable the individual to function with greater independence in the home. Modifications must have direct medical or remedial benefit.

”Companion services”- non-medical care, supervision and socialization provided to a functionally impaired adult. This service is provided in accordance with a therapeutic goal and is not merely diversional in nature; it is necessary to prevent institutionalization.

“Behavior programming”- individually designed strategies to decrease severe maladaptive behaviors which have interfered with the ability to remain in the community. A behavioral analysis must be completed by a qualified professional. Individuals with dual diagnosis will be excluded if their primary diagnosis is not brain injury and does not lend itself to behavioral intervention.

“Counseling and training” – Services to help the individual resolve personal issues or interpersonal problems resulting from the acquired brain injury. If counseling and training is provided to members of the client’s family, then it must be for the purpose of assisting the family on implementing the plan of care and for the direct benefit of the client.

“Structured day program”- services directed at the development and maintenance of community living skills in a non-residential setting separate from the home in which the recipient lives with a goal of community reintegration. The services focus on personal and living independence, work adjustment and productivity, psychological and social adjustment. The staffing ratio shall be no more than 5 people with brain injury to 1 staff person. Day programming, in any combination, shall not exceed 40 hours each week.

“Specialized medical equipment and supplies” – devices, controls, or appliances which are specified in the plan of care and enable recipients to increase their abilities to perform activities of daily living or to perceive, control, or communicate with the environment in which the individual lives. This excludes items which are not of direct medical or remedial benefit to the recipient which are essential to the rehabilitation and retraining of the individual.

“Prevocational services”- services are aimed at preparing an individual for paid or unpaid employment, but are not job or task oriented and include teaching such concepts as compliance, attending, task completion, problem solving and safety on a one-to-one basis. This is for persons not expected to join the general work force within one year.

“Supported employment”- services which consist of paid employment for persons for whom competitive employment at or above the minimum wage is unlikely, and who, because of their disabilities, need intensive ongoing support to perform in a work setting.

“Community residential services” – services which consist of up to 24-hour supervision and oversight, supportive services, individualized home care aide tasks, and individualized home management tasks. These services are intended to be a “step-down” from inpatient services and only as a last resort for those unable to live at home and do not include the costs of room and board.

“Occupational therapy, speech, hearing and language services”- if any or all of these services are available through the approved State Medicaid Plan, they will be provided under the State Medicaid Plan until the plan limitations have been reached. Under this waiver, services are provided beyond these limitations in order to provide the amount of care necessary to prevent institutionalization.

Waiting List

Currently there is no waiting list for the ABI Waiver Program.

Contact the Brain Injury Services Unit, 100 Fair Oaks Lane, Frankfort, KY 40601 or telephone 800-374-9146 TTY 502-564-5777 for additional information. Further details are available on the Internet at <http://dmhmrs.chr.state.ky.us/braininjury/abi.htm>

Brain Injury Association of Kentucky

The Brain Injury Association of Kentucky (BIAK) is a non-profit organization designed to serve those affected by brain injury through advocacy, education, prevention, research, service, and support.

Advocacy-especially for the Traumatic Brain Injury Trust Fund and the Acquired Brain Injury Waiver Program. Also for services of all kinds to improve the quality of life for survivors of brain injury and their family members.

Education to Acquired Brain Injury service providers is provided under contract with the Cabinet for Health Services to conduct training for provider certification and continuing education; and in the public schools regarding helmet safety.

Prevention- the HEAD Smart program emphasizes helmet safety. Coach Tubby Smith is the spokesperson for this statewide campaign. It is co-sponsored by the Kentucky Association of Trial Attorneys.

Research- rehabilitation students are invited to participate in activities at the Center POINT Program. Research findings from the national organization are disseminated through the “Across the Commonwealth” newsletter and via other medium.

Service- BIAK sponsors the Center Program Of Individualized Needs Targeting (Center POINT) which is an innovative program combining aspects of provider driven day treatment programs with consumer driven clubhouse model programs. This community center model addresses the individual needs of people with brain injuries in the metropolitan Louisville area. Participants develop skills in five areas:

Education

- goal development (short & long-term)
- motivational & informational speakers
- community outings

Vocational

- resume development
- interviewing and networking skills
- on-the-job social skills
- computer skills development

Personal Improvement

- exercise, diet and hygiene
- relaxation
- self-defense

Household Management and Leisure Planning

- scheduling household chores

- kitchen safety
- hobbies, arts and crafts

Social Interaction Skills

- social conduct (i.e. etiquette, telephone skills, and conversation)
- self-esteem, friendships, and relationships

The CenterPOINT Program is located at 425 South Second Street, Suite 311, Louisville, KY 40202 (inside the Christ Church Cathedral). Telephone number 502-582-2266

Support is given to callers on the toll-free telephone line at 800-592-1117. Many family members are referred to area councils where support groups are provided for people with brain injuries and family members.

Brain Injury Support Groups

Location	Telephone number
Louisville	
Baptist East Hospital	502-896-7456
Frazier Rehab CORF	502-429-8437
Frazier Rehab Center	502-582-7484
Pathways/Christopher East	502-459-8900
Lexington	
Cardinal Hill Rehab	859-254-5701 extension 5381
Owensboro	
Owensboro Mercy	270-688-4313
Thelma	
Carl Perkins Rehab	606-789-1440
Elizabethtown	
Healthsouth Rehabilitation Hospital	270-769-3100
Bowling Green	
Wellness Center located in Greenwood Mall	270-782-3322

Contact BIAK State Offices at 4229 Bardstown Road, Suite 330, Louisville, KY 40218 or call 502-493-0609 or 800-592-1117. Further details are available on the Internet at www.braincenter.org

Carl D. Perkins Comprehensive Rehabilitation Center

The Kentucky Department of Vocational Rehabilitation offers a Brain Injury Community Re-entry Program at this 210 beds rehabilitation facility in Thelma, Kentucky. Each year the Carl Perkins Center serves approximately 1,250 individuals with mental or physical disabilities from every part of the Commonwealth. In addition to the residential rehabilitation services, the Carl Perkins Center provides an outpatient rehabilitation program utilizing private funding and medical insurance reimbursement.

The Brain Injury Community Re-entry program consists of an intensive 90-day residential rehabilitative program to address many of the barriers to employment, such as memory, learning, self-esteem, etc. If necessary, this is followed by a program for vocational adjustment. This phase can last up to 4 months. The final phase is the vocational skills training that can last up to 48 months. During this phase, residents can receive additional training at Carl Perkins Center or be transported to the local technical college, or community college for vocational training and higher education.

Eligibility

Only consumers of the Department of Vocational Rehabilitation are eligible for residential treatment at the Carl Perkins Center. A person that has a physical or mental impairment which constitutes or results in a substantial impediment to employment and who can benefit in terms of employment outcome from vocational rehabilitation services may qualify. A vocational rehabilitation counselor that specializes in counseling, vocational assessment and job placement determines eligibility and sends a referral to the Carl Perkins Center. Carl Perkins Center staff, review the case record and determine if the consumer can benefit from the programs offered. A decision to accept a consumer into the program is based on the person's need for services and the availability of needed services. The consumer is contacted by staff at the Carl Perkins Center and given a date to enroll in the program.

Outpatient services are available to individuals that are not consumers of the Department of Vocational Rehabilitation for a fee. Private funds and medical insurance are accepted.

Services:

Brain injury assessment

Occupational therapy

Physical therapy

Speech therapy

Memory group

Cognitive therapy

Neuropsychology

Medical services

Behavioral services

Recreational therapy

Waiting List

No waiting list exists at this time.

Contact the Carl D. Perkins Comprehensive Rehabilitation Center, 5659 Main Street, Thelma, KY 41260 at 800-443-2187 and TTY 877-600-6111. Further details are available on the Internet at http://kydvr.state.ky.us/programs_services/cdpcrc.htm

Traumatic Brain Injury (TBI) Trust Fund Benefit Management Program

HMR Associates, Inc. as the Administrator of the Benefits Management Program for the TBI Trust Fund, provides case management, processes applications, informs people about TBI Trust Fund benefits, approves service plans, identifies gaps in current service delivery system, and reports findings to the TBI Trust Fund Board. HMR Associates convenes a service review panel to approve requests for services.

Eligibility

Applicants for the TBI Benefits Program shall have partial or total disability caused by injury to the central nervous system from physical trauma, damage to the central nervous system from anoxic and/or hypoxic episodes, allergic conditions, toxic substances, and/or other acute medical incidents resulting in impaired cognitive abilities or impaired physical functioning. Additionally the applicant must have no other viable funding source for needed services. The TBI Trust Fund is the payer of last resort. Several conditions are excluded from the definition of traumatic brain injury and are therefore not eligible. They include:

- a. strokes that can be treated in nursing facilities providing routine rehabilitation services;
- b. spinal cord injuries for which there are no known or obvious injuries to the intracranial central nervous system;
- c. progressive dementias and other mentally impairing conditions;
- d. depression and psychiatric disorders in which there is no known or obvious central nervous system damage; mental retardation and birth defect related disorders of long standing nature; and
- e. neurologically degenerative, metabolic, and other medical conditions of a chronic, degenerative nature.

Service definitions

“Case management” – case management services assist TBI Trust Fund applicants in gaining access to TBI Trust Fund supports and to other community based services; medical, social, education, and other services, regardless of funding source. Case management services include the coordination of the initial assessment and reassessment process that determine an individual’s eligibility or continued eligibility for TBI Trust Fund supports. Case management services also include on-going monitoring of the effectiveness of the supports provided to the individual under the TBI Trust Fund, referral to other service providers and appropriate documentation of services provided to the individual.

“Wrap-around funds” are part of the case management service and are used for specific purchases of services or implements, equipment or other items. Wrap-around funds are not used for the purchase of institutional services, hospitalization, environmental modifications, special medical equipment and supplies, medications, or behavioral programs. Wrap-around funds can be used when the case management service plan identifies a need for a special implement or service that will greatly enhance the success of the person’s plan for obtaining or maintaining community-based services. Wrap-around funds and services are approved by the Benefit Management Program.

“Community residential services” – community residential services shall include the retraining and rehabilitation of the individual in the performance of home care and home management tasks.

Community residential services may provide up to 24 hours services. The provider's time spent in the home during the individual's absence shall not be a covered community residential service.

When provided to residents of a residential center living in their units or apartment with full kitchen and bathroom, services may include:

- a. supervision and oversight;
- b. supportive services, such as socialization and assisting individuals with arranging meetings and appointments and providing transportation;
- c. individualized home care assistance tasks, such as preparing modified diets, reminding individuals to take medications or to perform exercises, household chores when the individual's care requires the prevention of exposure to infectious disease or containment of infectious disease, and assisting with dressing, oral hygiene, hair care, grooming, and bathing;
- d. individualized home management tasks, such as housekeeping, laundry, preparation of regular meals and snacks, and shopping. Community residential services may include the cost of room and board.

“Structured day programs”- a structured day program is the provision of services directed at the development and improvement of community living skills. The service takes place in a non-residential setting separate from the home in which the individual lives. This service includes supervision and specific training to allow the individual to achieve maximum potential in order to reintegrate into the community. Services may include social skills training, sensory/motor development, and reduction/elimination of maladaptive behavior. Services aimed at preparing the individual for re-entry into the community include teaching concepts and skills for independence such as: following directions; attendance; task completion; problem solving; safety; social appropriateness; and money management. Structured day program services shall be coordinated with any physical, occupational, speech or other rehabilitation services provided to the individual to prevent institutionalization and to assist the individual with rehabilitation and maintenance of community placement.

“Psychological services” – psychological services are designed to help the individual to resolve personal issues or interpersonal problems resulting from the brain injury. Psychological services may also include behavioral interventions for behavioral problems related to the brain injury, training to improve social skills, training to improve problem solving skills, training to remediate cognitive deficits resulting from brain injury; and therapy for substance abuse problems related to brain injury. Psychological services may also include psychological assessments necessary to assist in the development of services to the individual, including neuropsychological evaluations. If psychological services are provided to members of the individual's family, it must be to assist the family in implementing the recommended interventions for the individual.

“Prevocational services” – prevocational services are aimed at preparing an individual for paid or unpaid employment, but are not job or task oriented. Prevocational services are provided to individuals not expected to be able to join the general work force or to participate in a traditional sheltered workshop within one year (excluding supported employment programs). Individuals are not expected to be compensated for prevocational services or if compensated, will be paid at less than 50 percent of the minimum wage. Activities included in this service are not primarily directed at teaching specific job skills, but are directed at underlying habilitative goals, such as attention

span and motor skills. Prevocational services shall be designed to assist the individual in adjustment to a work environment through the following:

- a. assisting the individual toward optimal vocational development;
- b. assist the individual to understand the meaning, value, and demands of work;
- c. assisting the individual to learn or reestablish skills, attitudes, personal characteristics, and the work behaviors; and
- d. assisting the individual to develop functional capacities. Prevocational services shall be separate and distinct only when the services are over and above the structured day program's normal activities and provided on a one-on-one basis.

“Supported employment” – supported employment services shall be:

- a. paid employment for persons who are unlikely to obtain competitive employment at or above minimum wage and who need intensive ongoing support to perform in a work setting because of a disability;
- b. conducted in a variety of settings, particularly in work sites in which persons without disabilities are employed;
- c. activities needed to sustain paid work, including supervision and training. When supported employment services are provided at a work site in which persons without disabilities are employed, payment shall be made only for the supervision and training required as the result of the individual's disabilities and shall not include payment for the supervisory activities rendered as a normal part of the work setting.
- d. Supported employment services shall be provided in lieu of or in combination with the structured day program. One-on-one job coaching shall be provided at the job site either by day program staff or by contractual arrangements made by the day program in cooperation with the case manager.

“Companion services” – companion services include non-medical services, supervision and socialization services provided to a functionally impaired adult. A companion may assist the individual with such tasks as meal preparation, laundry, and shopping, but does not perform these activities as discrete services. The provision of companion services does not usually entail hands-on medical care. A companion may also perform light housekeeping tasks which are incidental to the care and supervision of the individual. These services are necessary to prevent institutionalization and to assist the individual in rehabilitation and in the maintenance of community placement.

“Respite care” – respite care is a service provided to individuals unable to care for themselves. It is provided on a short-term basis because of the absence or need for relief of those persons normally providing on going care. Respite care may be provided in the individual's own home; in a residence or in a setting approved by the Benefits Management Program. Respite care shall be available only to individuals living at home with family, or with other unpaid caregivers who need relief.

“Occupational therapy” – occupational therapy is the therapeutic use of self-care, work and leisure activities to increase independent functioning and to enhance skill development. This may include adaptation of tasks or the environment to achieve maximum independence and to enhance the quality of life.

“Speech and language therapy” – speech and language therapy is an intervention designed to maximize the individual’s language and cognitive skills which may include articulation therapy, or the design and instruction in the use of augmentative communication strategies or devices and cognitive retraining strategies.

“Environmental modifications” those physical adaptations to the home, which are necessary to ensure the health, welfare, and safety of the individual, or which enable the individual to function with greater independence in the home and must have direct medical or remedial benefit.

“Special medical equipment and supplies” – devices, controls, or appliances which are specified in the plan of care and enables recipients to increase their abilities to perform activities of daily living or to perceive, control, or communicate with the environment in which she or he lives. This excludes items which are not of direct medical or remedial benefit to the recipient which are essential to the rehabilitation and retraining of the individual.

“Behavioral programs”- individually designed strategies to decrease severe maladaptive behaviors which have interfered with the ability to remain in the community. A qualified professional must complete a behavioral analysis. Individuals with dual diagnosis will be excluded if their primary diagnosis is not brain injury and does not lend itself to behavioral intervention.

“Personal care services”- assistance with eating, bathing, dressing, personal hygiene, activities of daily living and includes the retraining of the individual in the performance of these activities. May include other activities which are essential to the recipient’s health and welfare.

“Counseling and training” – services to resolve inter-psychic conflicts resulting from the head injury. If counseling and training is provided to members of the client’s family, then it must be for the purpose of assisting the family on implementing the plan of care and for the direct benefit of the client.

Contact HMR Associates for additional information toll free at 877-722-2288 or TTY 502-564-5777.

Further details are available on the Internet at <http://dmhmrs.chr.state.ky.us/braininjury/tbi.htm>

Other Programs Available to People with Disabilities

Adult Mental Health Services

The Division of Mental Health contracts with fourteen (14) Regional Mental Health and Mental Retardation Boards for the provision of community mental health services. Each of the boards have geographically diverse service site locations and qualified service providers that diagnose and provide an array of services for persons with a mental illness. The only restriction on adult mental health services is that case management must be provided to people with serious mental illness and case managers are limited to the provision of case management services (they are not permitted to provide additional services such as outpatient counseling or clinical services).

Eligibility

Client eligibility is largely determined by the diagnostic interview conducted by a qualified mental health professional. If the professional determines that a psychiatric diagnosis exists then the client is eligible for services. The diagnosis must be consistent with the Diagnosis and Statistical Manual of the American Psychiatric Association.

Service definitions

“Diagnostic interview” means assessment by a qualified professional other than a psychiatrist during the intake process and includes one or more of the following; history, mental status exam, psychosocial, or assessment of other socio-economic needs/services.

“Intensive in-home” means provision of face-to-face therapeutic services to a client and the individual’s family, primarily in the home, with a goal of preventing out-of-home placement by teaching problem solving skills, behavior strategies, normalization activities and other treatment modalities as appropriate.

“Pre- Admission Screening and Resident Review (PASRR) Level II Evaluation” means a comprehensive Level II Evaluation conducted by a certified evaluator for the individual with mental illness, mental retardation, or related condition who is seeking admission to or continued stay in a Medicaid-certified nursing facility, or who requires a subsequent review because of a significant change in condition. The evaluation shall determine whether the person needs nursing facility level of care and if so, whether the person needs specialized services for mental illness or mental retardation.

“Consultation Pre-Admission Screening and Resident Review (PASRR)” means a brief face-to-face or telephone conversation between the nursing facility and center Pre-Admission Screening and Resident Review (PASRR) staff, that does not lead to a Pre-Admission Screening and Resident Review (PASRR) evaluation. Consultation contacts are designed to eliminate unnecessary referrals.

“Psychiatric diagnostic evaluation” means an interview and evaluation by a psychiatrist including history, mental status exam, or disposition. It may include communication with family or other sources, ordering and medical interpretation of laboratory or other medical diagnostic studies. It includes diagnostic review of medications, diagnostic review and interpretation of physical

examination from an outside physician. It does not include consultation for psychiatric evaluation of a patient.

“Medical evaluation” means an interactive medical and psychiatric diagnostic interview and examination. In addition to the procedures in psychiatric diagnostic evaluation, it may include diagnostic procedures which predominately use physical aids and non-verbal communication to overcome barriers to therapeutic interaction between a physician and the patient who has lost, or not yet developed either expressive language communication skills to explain symptoms and respond to treatment or the receptive communication skills to understand the physician.

“Psychological testing” means psychological evaluation.

“Miscellaneous purchases” means items provided for use by the client or the client’s family. This includes material items such as food, clothing, eyeglasses, toys, ramps, and school supplies. Includes adult mental health case management wraparound services to provide non-recurring costs of goods necessary for a stable living environment in the community for which no other method of payment is available.

“Therapeutic rehabilitation services (adult)” means services intended to assure that a person with a psychiatric disability possesses those physical, emotional, and intellectual skills to live, learn, and work in the individual’s own particular environment. The program shall teach effective coping mechanisms and problem solving skills to manage illness, overcome deficits in functioning or prevent unnecessary loss of functioning.

“Supported housing” means an array of activities and services designed to assist individuals to acquire and succeed in chosen housing situations. Activities revolve around choosing, getting and keeping regular housing in the community and may include accessing subsidies, locating suitable housing, negotiating leases, acquiring household items, moving into residences, and teaching housing related living skills.

“Residential crisis stabilization (adult)” means short term mental health treatment, 24 hours per day, available seven days per week, in a structured therapeutic environment which provides treatment for an acute psychiatric crisis as a prevention of or step down from inpatient treatment.

“Individual therapy” means a therapeutic service provided by a qualified professional other than a psychiatrist.

“Individual therapy- psychiatrist” means a therapeutic service provided by a psychiatrist.

“Group therapy” means therapeutic service by a qualified professional provided to individuals in a group setting.

“Intensive outpatient substance abuse” means a highly structured, intensive substance abuse rehabilitation program provided for individuals and their families that are experiencing problems related to alcohol or drug abuse or dependency. Includes assessment and diagnosis, education

regarding the dynamics of chemical dependency and co-dependency, individual counseling, group counseling, family education and structured recreational activities.

“Case management services (adult)” means services provided by a qualified professional which assist adults with serious mental illness in gaining needed medical, educational, social and other support services and may include: coordinating and arranging services identified in the client’s individual service plan; assisting client in accessing all needed services provided by a variety of agencies and other resources; monitoring the client’s progress through the full array of services; performing advocacy activities on behalf of the client; providing case consultation; and providing crisis assistance.

“Social club (Drop-in)” means a service to enable adults with severe mental illness to experience social acceptance, friendships and leisure activities with focus on personal growth through peer support and self-help.

“In-home support” means assisting the person with a disability in the individual’s own home. Includes in-home training and personal care provided to recipients living in non-specialized residential settings such as family homes or apartments. Services include live-in support person to provide support in areas of personal care, supervision (if needed) and home management on a live-in basis.

“Supported employment” means paid work in a variety of integrated settings. Support and assistance are provided in accessing and maintaining employment. Includes individual assessment, development of a vocational profile, job development, job placement, on-site job coaching or training in work and work-related skills, on-going supervision and monitoring of work performance, support to assure job retention, support and training in developing interpersonal skills, use of community supports and generic services essential to obtaining and retraining employment.

“Inpatient psychiatric hospital” means services provided in a psychiatric hospital operated by the Commonwealth of Kentucky, Cabinet for Health Services, Department for Mental Health and Mental Retardation Services or inpatient psychiatric hospital services contracted with Bluegrass Regional Mental Health and Mental Retardation Board or Appalachian Regional Hospital.

Waiting List

No formal waiting list is maintained for adult mental health services. Immediate access and service availability may vary in each region.

Contact the Adult Mental Health Service Branch, Division of Mental Health, 100 Fair Oaks Lane, Frankfort, KY 40621 or telephone 502-564-4448 or 800-374-9146 or TTY 502-564-5777 for additional information. Further details are available on the Internet at <http://dmhmrs.chr.state.ky.us/adultservices/>

Comprehensive Care Regions toll-free phone numbers

Four Rivers (Paducah)	800-592-3980
Pennyroyal (Hopkinsville)	800-264-5163
River Valley (Owensboro)	800-433-7291
Lifeskills (Bowling Green)	800-223-8913
Communicare (Elizabethtown)	800-641-4673
Seven Counties (Louisville)	800-221-0446
North Key (Covington)	877-331-3292
Comprehend (Maysville)	606-564-4016 (call collect)
Pathways (Ashland)	800-562-8909
Mountain (Prestonsburg)	800-422-1060
Kentucky River (Jackson)	800-262-7491
Cumberland River (Corbin)	606-864-2104 (call collect)
Adanta (Somerset)	800-633-5599
Bluegrass (Lexington)	800-928-8000

Children's Mental Health Services

The Cabinet for Health Services has contracts with fourteen (14) Regional Mental Health and Mental Retardation Boards for the provision of mental health services for children with emotional disabilities and their family members. Each board has service site locations that provide qualified mental health professionals that diagnose and treat children with emotional disorders.

Eligibility is determined by an interview resulting in a diagnosis consistent with the standards established in the Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association. Access and availability are limited in some areas of Kentucky. Families share in the cost of this program based on the sliding fee scale in each region determined by the number of family members and household income. Medicaid and private health insurance are also reimbursement sources.

Service definitions

“Diagnostic interview” means an assessment by a qualified professional other than a psychiatrist during the intake process and includes one or more of the following: history, mental status exam, psychosocial, or assessment of other socio-economic needs/services.

“Intensive in-home” means the provision of face-to-face therapeutic services to a client and family, primarily in the home, with the goal of preventing out-of-home placement by teaching problem solving skills, behavior strategies, normalization activities and other treatment modalities as appropriate.

“Psychiatric diagnostic evaluation” means an interview and evaluation by a psychiatrist including history, mental status exam, or disposition. It may include communication with family or other sources, ordering and medical interpretation of laboratory or other medical diagnostic studies. It includes diagnostic review of medications, diagnostic review and interpretation of physical examination from an outside physician. It does not include consultation for psychiatric evaluation of a patient.

“Medical evaluation” means an interactive medical and psychiatric diagnostic interview and examination. In addition to the procedures in psychiatric diagnostic evaluation, it may include diagnostic procedures which predominately use physical aids and non-verbal communication to overcome barriers to therapeutic interaction between physician and the patient who has lost, or not yet developed, either expressive language communication skills to explain symptoms and respond to treatment or the receptive communication skills to understand the physician.

“Psychological testing” means psychological evaluation.

“Specialized evaluation and consultation” means services that are normally supplied by providers other than Community Mental Health Centers to staff, clients and/or client families; appropriate when no other payer source is available. This service does not include speech therapy, but may include a wide range of evaluations and/or consultations, including those related to speech and hearing, occupational therapy, physical therapy, hospital discharge planning, sexual and domestic violence issues, a neurological assessment or a behavioral consultation.

“Intervention services (Intensive Family Based Support Services [IFBSS], Family Support Service)” means an array of services, supports and interventions designed to improve social skills, provide mentors, and meet the needs for family relief. These services are provided for the care of children with severe emotional disabilities and children with complex treatment needs. This includes care provided less than 24 hours and with no overnight stays.

“Intervention services (Intensive Family Based Support Services [IFBSS], Overnight Care)” means residential treatment/ care provided because of scheduled or emergency need for overnight care of children with severe emotional disability and children with complex treatment needs. Services may include behavior management, social and family living training, assessment and evaluation, emergency intervention, or linkages with community resources. Settings for these services may include a trained foster care, licensed shelter, or crisis stabilization unit.

“Miscellaneous purchases” means items provided for use by the client or the client’s family. This includes material items such as food, clothing, eyeglasses, toys, ramps, and school supplies. This service is also referred to as “wraparound” or “IFBSS”.

“Therapeutic foster family treatment” means long-term residential treatment for children with emotional disabilities in a trained foster family setting under the regular supervision of a clinician. Services include behavior management and social and family-living skills training.

“Therapeutic rehabilitation services (Children – After School Program) means after school program. Mental health professionals and paraprofessionals provide therapeutic activity after school hours for children with emotional disabilities to supplement Emotional Behavioral Disability programming in the school.

“Respite care hourly” means care provided to individuals unable to care for themselves, furnished on a short-term basis because of the absence or need for relief of those providing the care. This includes care provided less than 24 hours and with no overnight stay.

“Specialized personal care home services” means the care and support of persons which includes rehabilitation and treatment in a 24 hour, 7 days per week residential setting for individuals requiring a structured and supervised environment. Skill building as determined by resident’s goals and functional assessment and resident assistance in retaining the fullest possible control over their lives to make choices concerning the activities in which they are involved as well as services culturally appropriate and based on rehabilitation model are included.

“Residential crisis stabilization (Child and Adolescent)” means intensive, short-term, residential care for children in acute psychiatric distress in a community-based homelike setting. Services include assessment and evaluation, emergency intervention, and linkages with community resources.

“Residential support” means specialized on-site or off-site staff who provide support and/or supervision to residents of an agency owned and/or operated housing site or residential program.

“Individual therapy” means a therapeutic service provided by a qualified professional other than a psychiatrist.

“Individual therapy (Psychiatrist)” means a therapeutic service provided by a psychiatrist.

“Group therapy” means therapeutic service by a qualified professional provided to individuals in a group setting.

“Case management services (Children Mental Health)” means services provided by a qualified professional which assist children with severe emotional disability and their families in gaining needed medical, educational, social, and other support services, including: assessing service needs, resources, child and family functioning; facilitating development of interagency service plan; coordinating services; assisting in accessing needed services; intervening in the environment to improve functioning of the child and family; developing community resources; performing advocacy activities; providing crisis assistance; consultation with other service providers; establishing and maintaining current client records; and performing reassessment of client needs. This service is commonly referred to as “service coordination.”

“Community living supports” means services that facilitate independence and promote integration into the community for an individual residing in his home (i.e. not in a group home, family home, or staffed residence). Services include: assistance, activity training, laundry, routine household care and maintenance, activities of daily living, personal hygiene, shopping, use of money, medication management, socialization, relationship building, leisure choices, participation in generic community activities, therapeutic goals, and not diversional in nature.

“In-home support” means assisting the person with a disability in his own home. Includes in-home training and personal care provided to recipients living in non-specialized residential settings such as family homes or apartments. Services include live-in support person to provide support in areas of personal care, supervision (if needed) and home management on a live-in basis.

“Behavior support” means the use of a planned systematic application of techniques and methods to influence/change behavior in a desired way. It is based on the belief that behaviors are learned and are maintained because of their consequence. The techniques are used to increase positive behavior and decrease undesirable behaviors. The maladaptive or problem behavior is to be replaced with behaviors that are adaptive and appropriate. Behavior support activities include evaluation of the individual’s behavior including functional assessment, development of a behavioral support plan, training staff regarding implementing the behavior plan and monitoring the individual’s progress for needed plan revisions. Problem behaviors necessitating the use of behavior support are those which: are a danger to the person or others; result in damage to property; or interfere with the educational/developmental programs or interfere with the acceptance/integration into community activities. All programming and activities shall be designed to equip the individual to communicate his needs and to participate in age appropriate activities. Behavior support programs developed by the behavior specialist shall be implemented by provider staff of other program areas in all relevant environments and activities.

“Occupational therapy” means services such as assisting the physician in his evaluation of the individual’s level of functioning by applying diagnostic and prognostic tests and guiding the individual in his use of therapeutic, creative, and self-care activities for improving function.

“Physical therapy” means services such as assisting the physician in his evaluation of the individual’s level of functioning by applying muscle, nerve, joint, and functional ability tests; and treating individuals to relieve pain, develop and restore functions, and maintain maximum performance, using physical means such as exercise, massage, heat, water, light and electricity.

Waiting lists vary for region to region.

Contact the Children’s Mental Health Services Branch, Division of Mental Health, 100 Fair Oaks Lane, Frankfort, KY 40621 or telephone 800-374-9146 or TTY 502-564-5777 for additional information. Further details are available on the Internet at <http://dmhmrs.chr.state.ky.us/cysb>

Comprehensive Care Regions	toll-free phone numbers
Four Rivers (Paducah)	800-592-3980
Pennyroyal (Hopkinsville)	800-264-5163
River Valley (Owensboro)	800-433-7291
Lifeskills (Bowling Green)	800-223-8913
Communicare (Elizabethtown)	800-641-4673
Seven Counties (Louisville)	800-221-0446
North Key (Covington)	877-331-3292
Comprehend (Maysville)	606-564-4016 (call collect)
Pathways (Ashland)	800-562-8909
Mountain (Prestonsburg)	800-422-1060
Kentucky River (Jackson)	800-262-7491
Cumberland River (Corbin)	606-864-2104 (call collect)
Adanta (Somerset)	800-633-5599
Bluegrass (Lexington)	800-928-8000

The Commission for Children with Special Health Care Needs

The Commission for Children with Special Health Care Needs provides diagnosis and treatment for certain disabling conditions (congenital or acquired). Treatment is available statewide in clinics sites administered through fourteen (14) regional offices.

The list of conditions treated includes:

Asthma (Stage III and IV)
Burns
Cerebral Palsy
Cleft Lip and Palate
Craniofacial Anomalies
Cystic Fibrosis
Epilepsy
Eye Disease or Serious Refractive Error
Hand Surgery
Hearing Loss (Including Draining Ears)
Heart Defects
Hemophilia*
Neurology
Myelomeningocele (Spina Bifida),
Other Neurological Conditions
Orthopedic
Pediatric Rheumatology
Pediatric Surgery For Certain Newborn Congenital Anomalies
Plastic Surgery For Certain Conditions
Scoliosis
Sickle Cell Disease.

Children with the late effects of Meningitis or Encephalitis are eligible, as are children that have Neurologic Sequelae to Head Trauma or Spinal Cord Injury.

*The Commission treats both children *and adults* with Hemophilia.

Eligibility

- Must be a resident of Kentucky
- Must be between ages birth to twenty-one. (Exception: adults with Hemophilia.)
- Must have a condition usually responsive to medical treatment that falls within one of the listed diseases or conditions.
- Family must meet financial eligibility guidelines based on income. Family income must be at or below 200% of the Federal Poverty Level. Families with higher income levels are offered a sliding fee scale from 20% to 100% financial participation.

Diseases and conditions that are eligible include:

Cardiovascular: Arrhythmias; Congenital Heart and Vascular Defects; Chronic Conditions Secondary to Rheumatic Fever, Pericarditis, Kawasaki's Disease; Mitro Valve Prolapse (MVP)

Central Nervous: Ataxia and other Gait Disorders; Craniosynostosis; Epilepsy Disorders; Hydrocephalus; late effects of Meningitis or Encephalitis; Microcephaly; Movement Disorders; Myelomeningocele; Narcolepsy; Neurocutaneous Disorder; Neurodegenerative Disease; Neurofibromatosis; Tuberous Sclerosis

Connective Tissue: Dermatomyositis; Juvenile Rheumatoid Arthritis; Mixed Connective Tissue Disease; Scleroderma; Systemic Lupus Erythematosus

Craniofacial/ Plastic: Cleft Lip and Palate; Contracture Secondary to Burn; Craniofacial Anomalies; Hemangioma; Portwine Stain; Velopharyngeal Insufficiency

Ear: Acute and Chronic Otitis Media; Acute and Chronic Tinnitus; Hearing Loss-Conductive or Sensorineural; Mastoiditis

Eye: Amblyopia/Strabismus; Astigmatism ≥ 1.50 ; Blindness; Cataracts, Congenital or Acquired; Corneal Scarring or Deformity; Enucleations; Esotropia; Exphoria; Exotropia; Glaucoma; Hypertropia; Hyperopia (Farsightedness) $>+3.00$; Myopia (Nearsightedness) >-1.00 in better eye; Nystagmus; Ptosis of Eyelid; Retinal Detachment; Retinitis Pigmentosa; Tear Duct Dysfunction; Trauma

Gastro Intestinal: Cystic Fibrosis

Genitourinary: Enuresis for Sickle Cell; Myelomeningocele Associated Conditions only that include but not limited to Circumcision, Phimosis, Urinary Tract Infection (UTI), Enuresis, Hydrocele

Hematologic/Immunologic: Hemophilia; Other Factor Deficiencies; Sickle Cell Disease; Von Willebrand's Disease

Muscular: Myasthenia Gravis; Muscular Dystrophy; Neuropathy; Spinal Muscular Atrophy

Musculoskeletal: Achondroplasia; Amputations; Arthrogryposis; Cerebral Palsy; Charot-Marie-Tooth Disease; Chondroblastoma, Benign; Chondromalacia Patellae; Clubfoot; Clubhand; Enchondroma; Fibroma, Nonossifying Finger, Mallet, Trigger; Fractures of Joints; Fractures Associated with Bracing; Fractures Associated with Myelomeningocele, Cerebral Palsy, Osteogenesis, or Hemophilia; Friedrich's Ataxia; Genu Valgum (Knock Knee); Genu Varum (Bowleg); Hip Dislocations or Dysplasia, (Congenital); Hip Subluxation; Klippel-Feil Syndrome; Knee-Dislocation of Patella; Meniscus-Discoid, Lateral Medial; Legg Perthes Disease; Madelung's Deformity; Metatarsus Adductus or Varus Myositis Ossificans; Osgood Schlatters Disease; Osteochondritis Dissecans; Osteochondroma (Benign Hemartoma); Osteochondrosis; Osteogenesis Imperfecta; Osteoid Osteoma; Osteomalacia; Osteomyelitis (Acute and Chronic); Osteonecrosis (Avascular Necrosis of Femoral Head); Osteopetrosis; Osteoporosis Paget's Disease; Plydactly (Extra Digits); Rheumatoid Arthritis; Rupture of Achilles Tendon; Scheuermann's Disease; Scoliosis; Severs Disease (Painful Heels); Slipped Capital Femoral; Epiphysis, Acute or Chronic;

Sprengels Deformity (Congenital High Scapula); Syndactly (Webbed Fingers); Tibia-Pseudoarthrosis, Torsion; Tuberculosis of Bone; Unicameral Bone Cyst

Pulmonary: Asthma Levels III and IV; Cystic Fibrosis

Services include:

Diagnosis

Medical Treatment for Listed Conditions

Care Coordination

Outpatient Clinic Care

Outpatient Surgery

Hospital Discharge Planning

Audiology Services (Including management of the state Hearing High Risk Registry)

In-patient Hospital Care including Surgery

Purchase of Durable Medical Equipment

Physical Therapy

Speech Therapy

Occupational Therapy

Nutritional Counseling

Social Work

Assistive Technology

Psychological Evaluation

In-school Screening for Hearing

Spinal (Scoliosis) Screening Training

Referral and linkage is provided for services not covered by the Commission.

Support Groups

Waiting List

No waiting list at the current time. Applications may be made at any regional office or through the central regional office in Louisville. Contact the Commission for Children with Special Health Care Needs, 982 Eastern Parkway, Louisville, KY 40217. Telephone: 800-232-1160 or 502-595-4459. Further details are available on the Internet at <http://cfc-chs.state.ky.us/chs/cwshcn/info.htm>.

Commission for Children With Special Health Care Needs Regional Offices:

1409 Blackburn
PO Box 1561
Ashland, KY 41105
Phone: 606-920-2117
FAX: 606-920-2126
Toll Free: 800-650-1329

110 Johnson Lane
PO Box 1330
Barbourville, KY 40906
Phone: 606-546-5109
FAX: 606-546-4199
Toll Free: 800-348-4279

495 Three Springs Road
Bowling Green, KY 42104
Phone: 270-746-7816
FAX: 270-746-7877
Toll Free: 800-843-5877

St. Elizabeth Medical Center
Pediatrics - Room 3328
One Medical Village Drive
Edgewood, KY 41017
Phone: 859-578-5135
FAX: 859-578-5140
Toll Free: 888-542-4453 (ext. 5135 for voice mail)

580-B Westport Road
Elizabethtown, KY 42701
Phone: 270-765-6982
FAX: 270-769-5121
Toll Free: 800-995-6982

68 Independence Drive
Hazard, KY 41701
Phone: 606-435-6167
FAX: 606-435-6164
Toll Free: 800-378-3357

712 West 15th Street
Hopkinsville, KY 42240
Phone: 270-885-9903
FAX: 270-885-9914
Toll Free: 800-727-9903

333 Waller Avenue, Suite 300
Lexington, KY 40504
Phone: 859-252-3170
FAX: 859-225-7155
Toll Free: 800-817-3874

214 West 1st Street
Morehead, KY 40351
Phone: 606-784-3049
FAX: 606-784-1388
Toll Free: 800-928-3049

Owensboro-Daviess County
Health Department
1600 Breckenridge
PO Box 1823
Owensboro, KY 42302
Phone: 270-687-7038
FAX: 270-687-7040
Toll Free: 877-687-7038

Park Avenue Suites
400 Park Avenue- Bldg D.
Paducah, KY 42001
Phone: 270-443-3651
FAX: 270-441-7119
Toll Free: 800-443-3651

741 Parkway Drive
PO Box 941
Salyersville, KY 41465
Phone: 606-349-7411
FAX: 606-349-7410
Toll Free: 800-594-7058

Professional Plaza-Suite 104
401 Bogle Street
Somerset, KY 42503
Phone: 606-678-4454
FAX: 606-679-5599
Toll Free: 800-525-4279

982 Eastern Parkway
Louisville, KY 40217-1566
Phone: 502-595-4459
FAX: 502-595-4673
FAX (Clinical Services): 502-595-3175
FAX (Clinic): 502-595-3202
Toll Free: 800-232-1160

Crime Victims Compensation Board

The Crime Victims Compensation Board is a state agency that utilizes state and federal funds to reimburse unpaid medical and hospital expenses, lost wages (up to \$150 per week) and unpaid funeral expenses (up to \$5,000) for a victim of crime. The fund is limited to \$25,000 per victim for any combination of medical, lost wages and funeral expense; however, by statute, this amount is reduced by the amount received from other sources such as insurance, Medicaid, Medicare, donations, contributions, etc. Psychological counseling for a maximum of two years is also an eligible expense, in cases where it is applicable. Applicants may apply directly to the Crime Victims Compensation Board, or by contacting the Commonwealth Attorney's Office in their local county. A Crime Victim Advocate that works in the Commonwealth Attorney's Office or in another community agency is available to assist a crime victim with the application.

Eligibility

Any person who is an innocent victim of a criminal act, including victims of drunk drivers, who suffered bodily or psychological injury or death, or who has lost earnings or support, as a result of crime. The victim must report the crime to the proper authorities within 48 hours, and must cooperate with law enforcement agencies. The victim must qualify under the Board's definition of financial hardship. The victim cannot be a person who was in jail or in an institution run by the Cabinet for Human Resources at the time of the crime. A copy of the police report describing the crime must be submitted with the application for assistance. Injuries that the victim received as a result of the crime must be listed. The medical expenses must be related to the injuries that resulted from the crime. If the victim was employed at the time of the crime, employment verification completed by the victim's employer is required. If the victim is deceased, the person filling out the application must be the legally responsible party for the funeral and attach the funeral bill and death certificate. A person injured as a result of a drunk driver who was a willing passenger of the drunk driver is not eligible for this benefit. A victim of a drunk driving crash that was not a passenger of the drunk driver is eligible for the Crime Victims Compensation.

Contact

For more information contact the Crime Victims Compensation Board, 130 Brighton Park Boulevard, Frankfort, KY 40601 telephone 800-469-2120 or 502-573-2290.

Department for the Blind

The Department for the Blind, an agency of the Cabinet for Workplace Development, provides services to individuals with visual disabilities so they may improve their opportunities for employment and become more independent and productive in the community and workplace. The agency operates under federal regulations per the Rehabilitation Act and amended in 1992 and State statutes KRS 163.450-470.

Eligibility

Persons that are visually disabled such that a substantial impediment to employment exists and vocational rehabilitation services are necessary to help the individual prepare for, enter, engage in or retain gainful employment. In order to determine eligibility, the visual disability must be documented by an eye examination performed by an ophthalmologist or optometrist of the individual's choice. Medical, vocational, work adjustment and educational evaluations may be utilized to determine eligibility and to determine which services will be of benefit. When a person becomes a Department for the Blind consumer, counselors and other staff work with the individual to create an individual plan for employment. This plan will be in print form as well as in an alternative format so both the counselor and the consumer can evaluate progress. The plan helps to move the consumer toward specific vocational goals, such as keeping an existing job, gaining a new job, homemaking or self-employment. Consumers are asked to participate in choosing goals, objectives and services, including service providers. The Department of the Blind governs the scope, nature and costs of its services. Consumers are required to utilize comparable benefits, but at this time, there is not an economic needs test.

Services

The Department for the Blind may provide many of the services the consumer needs to reach his or her vocational goal and enter employment. These services include:

Diagnostics and Evaluation

Counseling and guidance

Medical, surgical and therapy

Vocational training

Room and board as necessary to undertake other services

Transportation as necessary to undertake other services

Orientation and mobility

Visual magnifying devices to improve existing vision

Assistive technology: Braille, computer technology and speech devices

Occupational licenses, tools and equipment

Placement into employment

Post-employment support

The Charles McDowell Center in Louisville provides specialized services to Kentuckians with visual disabilities who want to develop the skills to function independently and become employed. Professionals provide individualized instruction in speech and Braille, communication devices, alternative housekeeping and cooking skills, community travel skills, using remaining vision and computer assistive technology. Vocational specialists provide individuals information as to choices of new and exciting careers. Classes are also available for those who want to complete a GED. The center promotes a community setting in which individuals may learn from the experiences of each other. A specialty store maintains an inventory of such devices as canes, talking calculators, Braille and talking watches and recording equipment. The Department also provides recordings of printed materials and textbooks through the agency, operated Volunteer Recording Units in Lexington and Paducah.

Contact the Charles W. McDowell Center, 8412 Westport Road, Louisville, KY 40242 or telephone 800-346-2115 or TTY 800-321-6668 or TTY 502-327-7556. Further details are available on the Internet at <http://kyblind.state.ky.us>

Department of Vocational Rehabilitation

The Department of Vocational Rehabilitation provides services to assist eligible individuals with disabilities to prepare for, secure, retain, or regain appropriate employment.

Eligibility

A person that has a physical or mental impairment which constitutes or results in a substantial impediment to employment and who can benefit in terms of an employment outcome from vocational rehabilitation services may qualify. Persons that receive Social Security disability or Supplemental Security benefits for a disability are presumed to be eligible for services. There are no upper or lower age limits although the individual must be of employable age by the time rehabilitation services have been completed. For school-aged children, that is generally two years prior to the anticipated exit from the school system. A vocational rehabilitation counselor that specializes in counseling, vocational assessment, and job placement determines eligibility. The counselor looks at functional limitations in the following areas: mobility, work tolerance, work skills, self-care, self-direction, communication, and interpersonal skills. An individual with a “most significant” disability has serious limitations in four or more of these functional capabilities or requires long term support to facilitate work activities. When the Department of Vocational Rehabilitation does not have sufficient funds to serve everyone, priority is given to those persons with the “most significant” disabilities. An eligibility decision must be made within 60 days unless the individual and the counselor agree to a delay for a specific period of time. The individual and counselor jointly develop and agree upon an individual plan of employment to assist the individual in reaching employment goals.

Individuals with visual impairments are served by the Department for the Blind, toll free telephone number 800-346-2115.

Services

The Department of Vocational Rehabilitation provides services necessary to meet the employment needs of the eligible individual. These services may include:

Assessment for determining eligibility and vocational rehabilitation needs

Counseling and guidance

Physical and mental restoration services such as:

1. Diagnostic assessments and medical treatment
2. Drugs and supplies
3. Prosthetic, orthotic, or other assistive devices, including hearing aids
4. Eyeglasses and visual services
5. Physical therapy
6. Occupational therapy
7. Speech or hearing therapy
8. Other medical or medically related rehabilitation services

Vocational and other training services

Supported Employment including long term support throughout the duration of the individual's employment.

Transportation and other services necessary to participate fully in the rehabilitation program

Occupational licenses, tools, and equipment

Personal assistance services designed to assist an individual with a disability to perform daily living activities on or off the job that the individual would typically perform without assistance if the individual did not have a disability. The services must be necessary to the achievement of an employment outcome and can be provided only while the individual is receiving other vocational rehabilitation services

Interpreter and note taking services

Telecommunications, sensory, and other technological aids and devices

Assistive technology services to assist an individual with a disability in the selection, acquisition, or use of an assistive technology device

Job placement and job retention services

Employment follow-up and post-employment services

In addition, the Department of Vocational Rehabilitation operates the Carl D. Perkins Comprehensive Rehabilitation Center in Thelma, Kentucky which offers a Brain Injury Community Re-entry Program as well as comprehensive rehabilitation services to individuals with other physical or mental disabilities. A description of the Brain Injury Community Re-entry Program is available in the section of this document addressing the Carl D. Perkins Comprehensive Rehabilitation Center.

Waiting List

There is no waiting list to apply for services. Eligibility is determined within 60 days of application.

Contact the local Vocational Rehabilitation office or call (voice or TTY) 800-372-7172 to find one near by. Further details are available on the Internet at <http://kydvr.state.ky.us>.

Early Periodic Screening Diagnostic and Treatment Special Services (EPSDT)

Early Periodic Screening Diagnostic and Treatment Special Services are other health care, diagnostic services, preventive services, rehabilitative services, treatment or other measures described in 42 USC Section 1396d(a), that are not otherwise covered under the Kentucky Medicaid Program and are medically necessary to correct or ameliorate defects and mental and physical illnesses and conditions. There are some exceptions, respite care being one, that is considered as a convenience for the caregiver. A personal care attendant is another level of care that is difficult to document medical necessity. Examples of services that may be covered include extended treatment in a behavioral health facility, private duty nursing for an individual that requires skilled nursing care, pharmacy services for certain medications not covered by Medicaid, dental procedures not otherwise covered by Medicaid, and medical equipment not covered by Medicaid.

Eligibility

Medical necessity is determined by Health Care Review, from specified information submitted by the provider of service. Health Care Review is located at 9200 Shelbyville Road, Suite 800, Louisville, KY 40222, phone number 800-292-2392. Providers of service must obtain an ESPDT provider number, a request for application should be sent to Unisys Corporation Provider Relations, Post Office Box 2100, Frankfort, KY 40602. The phone number for Provider Enrollment is 877-838-5085.

Individuals who have a Medicaid Card can apply for items under EPSDT through a Medicaid service provider. It is important to gather the proper documentation when making an application through a service provider. The materials that must accompany an ESPDT application are:

1. a physician's order (on a prescription pad).
2. a letter of medical necessity from the physician, physical therapist or other qualified personnel. This letter should include:
 - a patient history,
 - a diagnosis and prognosis,
 - a medical justification for each item,
 - a thorough description of the benefit to the patient
 - the length of time the patient will need the item
3. product information, and
4. prices from different providers with comparable products that might fit the patient's needs.

Contact

For further information contact the Children's Services Branch, Department for Medicaid Services, 275 East Main Street, Frankfort, KY 40621 or telephone 502-564-6890 or 800-635-2570 and TTY 800-648-6056 or 800-372-2973.

First Steps

First Steps is Kentucky's early intervention program that serves children from birth to age three (3) that have a developmental delay or a particular medical condition that is known to cause developmental delay. This program was authorized by KRS 200.654 and is regulated under 908 KAR 2:100-180 and KAR 2:200. Fifteen (15) district point of entry offices have been established to provide home visits, explain the First Steps Program, arrange for an evaluation, and develop the child's initial Individual Family Service Plan. The evaluation determines if the child has a significant delay in one (1) or more of the following skill areas: communication, mobility, learning, social, emotional, and adaptive. The point of entry initial service coordinator, family, physician, evaluator and identified team members will design an Individualized Family Service Plan that identifies needed resources and services. This plan is reviewed and updated every six (6) months. For children nearing their third birthday, transition planning occurs to link the family with services and programs appropriate for three (3) to five (5) years old children, i.e. Head Start, local school district programs, social services, medical services, etc.

Eligibility is determined by the evaluation of developmental delay, or the medical diagnosis of established risk conditions (i.e. shaken baby syndrome, bacterial or viral meningitis, etc). There were 7,146 children referred to the program during 1999 and 5,098 enrolled. There is no waiting list. Families share in the cost of this program based on a sliding fee scale determined by number of family members and household income.

Service definitions

"Evaluation" means evaluation to determine eligibility.

"Assessment" means assessment for the purpose of service planning.

"Individual Family Service Plan" means a written plan stating what services will be provided, in what setting, how often, by whom, and what funding source will be utilized.

"Medical health services" means the provision of services by a physician for evaluation purposes to determine a child's developmental status and need for early intervention services.

"Nursing health services" means services provided by a nurse to promote optimal health, safety and well being of the child. These services are limited.

"Nutrition" means individual child assessment, nutritional assessment, dietary intake, and consultation in meeting nutritional needs.

"Occupational therapy" means therapy designed to improve the child's ability to socialize, pay attention, play, eat, dress and perform toileting and grooming tasks.

"Physical therapy" means therapy that enhances muscle and motor development.

"Developmental intervention" means services that provide families with information, skills and support related to enhancing the skill development of the child in areas of physical, social, emotional, communicative and cognitive development.

“Assistive technology” means providing devices to increase, maintain or improve the functional capabilities of the child. This can be a service or equipment.

“Communication development” means identifying children with communication oro-pharyngeal disorders and delays in development of communication skills; providing services for the habilitation, rehabilitation, or prevention of those communication disorders/delays; and referring to other professionals for services necessary to enhance communication.

“Vision services” means evaluating and assessing visual functioning, training in communication skills, orientation and mobility, visual development, independent living skills and other skills necessary to activate visual motor abilities; and referring to other professionals for services necessary for habilitation or rehabilitation of visual disorders.

“Audiology” means evaluating and assessing auditory functioning, determining the range, nature and degree of hearing loss and communication functions; and referring to other professionals for services necessary for habilitation or rehabilitation of hearing disorders.

“Respite” means temporary, short-term care to provide relief to families from the responsibility of caring for their infant/toddlers, reduce family stress, maintain family integrity, and forestall out of home placement.

“Transportation” means cost of travel and related costs to those who are in need of transportation that is necessary to enable an eligible child and his/her family/caregivers, to participate in and receive early intervention services.

No Waiting List

To make a referral to the First Steps Program, contact your local point of entry listed below.

Contact the First Steps Program, Division of Mental Retardation, 100 Fair Oaks Lane, 4 E-E, Frankfort, KY 40621 or telephone 502-564-7722 or 800-442-0087 or TTY 502-564-5777 for additional information.

First Steps Point of Entry Phone numbers

Area Development District	local number	toll free number
Purchase	270-442-5831	800-648-6599
Pennyrile	270-886-5186	800-609-0047
Green River	270-686-5982	888-686-1414
Barren River	270-746-9941	800-643-6233
Lincoln Trail	270-737-5921	800-678-1879
Kentuckiana	502-459-0225	800-442-0087
Northern Kentucky	859-815-1095	888-300-8866
Buffalo Trace	606-759-5510	800-335-4249
Fivco	606-325-3738	800-298-6525
Gateway	606-674-3204	800-718-0378
Big Sandy	606-478-8572	800-230-6011
Kentucky River	606-439-1325	800-328-1767
Cumberland Valley	606-523-0229	800-509-9559
Lake Cumberland	606-678-2821	800-378-2821
Bluegrass	859-271-9448	800-454-2764

Home and Community Based Waiver

The Home and Community Based Waiver program provides necessary medical services to Medicaid eligible individuals who are aged or disabled that would otherwise require nursing facility level of care. The array of services provided in accordance with an individualized plan of care include the following: assessment and reassessment, case management, homemaker services, personal care services, respite services, minor home adaptations, attendant care services, and adult day health care services. The Home and Community Based Waiver is available statewide through licensed Home Health Agencies and licensed Adult Day Health Care Centers.

Eligibility

Medicaid recipients that are currently residing in a nursing facility shall be eligible to receive Home and Community Based Services upon discharge to avoid reinstitutionalization. If nursing facility services are necessary and the recipient chooses to consider the Home and Community Based option, a referral shall be made to the Home and Community Based agency of the recipient's choice. Level of care determination for all recipients that wish to consider the Home and Community Based alternative shall be performed by Kentucky Peer Review Organization (Health Care Review located in Louisville). A physician must certify that if Home and Community Based services were not available, the physician would order nursing facility care for the individual under the physician's care.

Service definitions

"Assessment" is the collection of in-depth information about an individual's situation and functioning. The assessment shall include evaluation of the client's physical, mental, and emotional health; social supports; and environment. It shall identify the individual's needs and the services which the individual and family cannot manage or arrange for themselves. The assessment of the individual's circumstances is a tool used to develop a plan of services to prevent institutionalization at the nursing facility level and to maintain family and other community supports.

"Reassessment" of the continuing need for Home and Community Based services shall be performed at least every twelve (12) months or more often, if indicated, by a change in the recipient's condition. The same general procedures used in the initial assessment shall apply to the reassessment. It is not necessary to obtain a new physician's statement or to complete a new Long Term Care Certification Form.

"Case management" is a system under which responsibility for locating, coordinating and monitoring a group of services rests with a designated person. Case management is management and coordination of the delivery of all services to the recipient, including direct recipient services provided by the agency as well as all other services including, volunteer services, informal support services, physician or clinic visits. It may also include arranging for drugs, supplies, or related medical equipment. A quality case management system eliminates fragmentation and duplication of patient services; ensures the continuity of necessary services, monitors all aspects of patient care; observes changes in condition or unmet needs; ensures the most appropriate and cost-effective patient care; facilitates a close and positive relationship with the recipient and affords the recipient and family the security of knowing a person who is knowledgeable of their needs and will assist them as needed.

“Homemaker services” consist of general household activities (meal preparation and routine household care) provided by a trained homemaker. The service shall be covered when the recipient is functionally unable to perform these tasks, or the individual regularly responsible for these activities is temporarily absent or functionally unable to manage the home and care for self or others in the home, and arrangements cannot be made with other relatives or friends to provide the service. “Functionally unable” is defined to include the situation when the sole caregiver is absent from the home for a substantial length of time, i.e. full-time employment which would prevent the caregiver from providing the service.

“Personal care services” shall be furnished to a recipient in the recipient’s home in accordance with the plan of care. These services shall be provided by an individual who is qualified, supervised by a registered nurse, and not a member of the recipient’s family. Personal care services shall be medically oriented services relating to the recipient’s physical requirements as opposed to housekeeping requirements. Personal care services shall be prescribed only in cases where the recipient does not need highly skilled or technical care. Personal care may be provided in conjunction with homemaker services for the same recipient using the appropriate records for time and procedures.

“Respite care” shall be defined as care which is provided to an individual on a short-term basis because of the absence or need for relief of those persons normally providing the care. The need for relief may be caused by a hospital stay of a caregiver, other family problems affecting caregiver, vacation for caregiver, or the need for relief of the caregiver on a more regular basis, such as every two (2) weeks. Respite care may be provided in the individual’s place of residence, which may be the individual’s own home or the home where the individual is staying at the time the service is provided. The Home and Community Based Agency shall be responsible for arranging, providing, and monitoring respite care services. The Home and Community Based Agency shall be responsible for ensuring that the respite care is provided at a level to appropriately and safely meet the medical needs of the recipient and that the caregiver has appropriate training and qualifications. This care may require that the respite care provider be a licensed nurse. Respite provided to children shall be required to be of a skill level beyond normal baby-sitting. The Home and Community Based Agency shall also be responsible for ensuring adequate supervision of the respite care providers. The respite care provider shall not be a member of the recipient’s family.

“Minor home adaptations” under the waiver shall be changes or additions that are to be made to the individual’s living environment to make it possible for the individual to remain in the current living arrangement. The adaptations shall relate strictly to the individual’s disability and needs and are necessary for the individual to be able to function in his current living arrangement. These adaptations do not have utility for a person without such a disability and do not constitute ineligible room and board or general housing maintenance. Major repairs shall not be considered adaptations and shall not be covered. Minor home adaptations includes bathtub rails, commode railings, grab bars, commode extenders, step railings, bathtub seat, ramps, etc., including labor and necessary supplies. Through the provision of minor home modifications under the waiver, injury may be avoided that would further incapacitate the individual who already has care needs within the scope of nursing facility benefits. Furthermore, these adaptations may mean the difference between being able to remain at home and being admitted to a nursing facility.

“Attendant care service is defined as hands-on care of a medically oriented (appropriate to the skill level of the attendant care provider) and non-medically oriented nature specific to meet the needs of an individual who; is medically stable but very functionally dependent; and who has family, friend or other support providing some of the care, but who are employed outside the home and therefore, are unable to provide care during working hours. The family or friend providing care shall not be required to live in the same residence as the individual receiving care.

“Medically oriented” relates to the individual’s physical needs requirements as opposed to the individual’s housekeeping needs.

“Non-medically oriented” relates to activities which are necessary to the performance of environment specific housekeeping needs.

Approval shall not be given for personal care, homemaker or adult day health services when attendant care has been authorized.

“Adult day health care service” coverage shall include at least the following: one meal per day including special diets; snacks, as appropriate; registered nurse and other supervision; regularly scheduled daily activities; routine services required to meet the personal and health care needs; equipment essential to the provision of adult day health care services; and incidental supplies necessary to provide adult day health care services.

Waiting List

Currently, there is no waiting list for the Home and Community Based Waiver Program or for the Adult Day Health Care Program.

Contact the Department for Medicaid Services, 275 East Main Street, Frankfort, KY 40621 or telephone 502-564-5707 or TTY 800-372-2973 for more information. Further details are available on the Internet at <http://cfc-chs.chr.state.ky.us/chs/dms>

Homecare Program

The Homecare Program, authorized under 910 KAR 1:180, is for Kentuckians aged sixty (60) years and over who have functional or physical disabilities or other self-care problems. Services are provided to help them continue to live independently. Office of Aging Services, Cabinet for Health Services contracts with fifteen (15) Area Agencies on Aging (that are part of the 15 Area Development Districts) for services to aging persons statewide. Federal, state and local funds are used by local organizations to provide services and programs that help maintain older persons in their own homes.

Eligibility

Eligible recipients must be at least sixty (60) years old and at risk of going into a nursing home or a person in a nursing home who could go home if helped. This program serves approximately 12,000 persons annually.

Each applicant for Homecare services shall file an application for participation and demonstrate that he is a person sixty (60) years of age or older and meets at least one (1) of the following criteria:

- (a) The applicant has functional limitations that require a sheltered environment with the provision of social and health related services specific to his activities of daily living (i.e. feed, bathe, dress, transfer, and toilet oneself) and who has been determined impaired in at least two (2) physical activities of daily living or three (3) instrumental activities of daily living (i.e. shopping, budgeting, meal preparation, laundry, cleaning, taking of prescribed medication).
- (b) The applicant has a stable medical condition requiring skilled health services along with services related to activities of daily living requiring an institutional level of care; or
- (c) The applicant is currently residing in a skilled nursing facility, an intermediate care facility or a personal care facility and can be maintained at home if appropriate living arrangements and supports can be established.

Service definitions

“Assessment” means the collection of in depth information about a person’s situation and functioning. Assessment shall identify needs and resources so that a comprehensive plan can be made with the client.

“Case management” means a process for ensuring clients receive appropriate, comprehensive and timely services to meet their needs as identified in the assessment by planning, linking the client to appropriate agencies in the formal and informal care giving systems, monitoring and advocacy through the employment of casework activities in order to achieve the best possible resolution to individual needs in the most effective way.

“Homecare services” means those services to eligible individuals directed toward preventing unnecessary institutionalization of functionally impaired older persons and towards maintaining those eligible for services in the least restrictive environment, excluding residential facilities. Homecare services shall include homemaker, home health aide, chore, home delivered meals, escort, home repair, and respite services.

“Personal care services” means services directed toward maintaining, strengthening, or safeguarding the functioning of a person in his home. These services may include assisting the individual in activities of daily living and helping to identify and report health needs.

“Home management services” means those services ordinarily involved with housekeeping, necessary to maintain a person in his own home. These services may include shopping, budgeting, meal preparation, laundry, and cleaning.

Waiting List

Waiting lists vary from district to district, but statewide there are over 3,000 on the waiting list.

Contact the Office of Aging Services, 100 Fair Oaks Lane, Frankfort, KY 40621 or telephone 502-564-6930 for additional information. Or contact one of the local Area Agencies on Aging listed below.

Kentucky Area Agencies on Aging

Purchase Area
100 Medical Drive
Mayfield, KY 42066-0588
Phone 270-247-7171

Pennyryle Area
300 Hammond Drive
Hopkinsville, KY 42240
Phone 270-886-9484

Green River Area
3860 US Highway 60 West
Owensboro, KY 42301-0200
Phone 270-926-4433

Barren River Area
177 Graham Avenue
PO Box 90005
Bowling Green, KY 42102-9005
Phone 270-781-2381

Lincoln Trail Area
613 College Street Road
PO Box 604
Elizabethtown, KY 42702-0604
Phone 270-769-2393

Kentuckiana Regional Planning
Development Agency
11520 Commonwealth Drive
Louisville, KY 40299
Phone 502-266-6084

Northern Kentucky Area
16 Spiral Drive
PO Box 668
Florence, KY 41022-0668
Phone 859-283-1885

Buffalo Trace Area
327 West Second Street
PO Box 460
Maysville, KY 41056
Phone 606-564-6894

Gateway Area
Courthouse Annex, Main Street
PO Box 1070
Owingsville, KY 40360
Phone 606-674-6355

Fivco Area
PO Box 636, 3000 Louisa Street
Catlettsburg, KY 41129-0636
Phone 606-739-5191

Big Sandy Area
100 Resource Drive
Prestonsburg, KY 41653
Phone 606-886-2375

Kentucky River Area
381 Perry County Park Road
Hazard, KY 41701
Phone 606-436-3158

Cumberland Valley Area
342 Old Whitley Road
PO Box 1740
London, KY 40743-1740
Phone 606-864-7391

Lake Cumberland Area
2384 Lakeway Drive
PO Box 1570
Russell Springs, KY 42642
Phone 270-866-4200

Bluegrass Area
699 Perimeter Drive
Lexington, KY 40517
Phone 859-269-8021

Kentucky IMPACT (Interagency Mobilization for Progress in Adolescent and Children's Treatment)

Kentucky IMPACT is a state sponsored interagency effort to plan, develop, and implement community based services for emotionally disturbed children and their families. IMPACT coordinates services among Kentucky's five (5) child-serving systems: education, health, social services, mental health, and courts. Parents of children with severe emotional disabilities serve as full partners at every level of decision making. The program is community-based and centered on the individual needs of the child and family. The primary service is case management.

Eligibility

Children must meet all the following requirements: be under eighteen (18) years of age, with a diagnosis of a psychiatric disorder (diagnosis of chemical dependency, mental retardation or organic brain disorder may be present but they cannot be the primary diagnosis). Candidates must also be severely limited in at least two (2) of the following areas: self-care, interpersonal relationships, family life, self-direction, and education; and have been disabled for at least one (1) year or judged by a qualified mental health professional to be at high-risk to continue in the disability for a year or more without intervention; and require service coordination and service planning from two (2) or more agencies at the same time. Priority will be given to children who are currently living outside their homes, children who are at risk of being placed in a hospital or treatment facility, and children with a history of placements in a hospital or treatment facility.

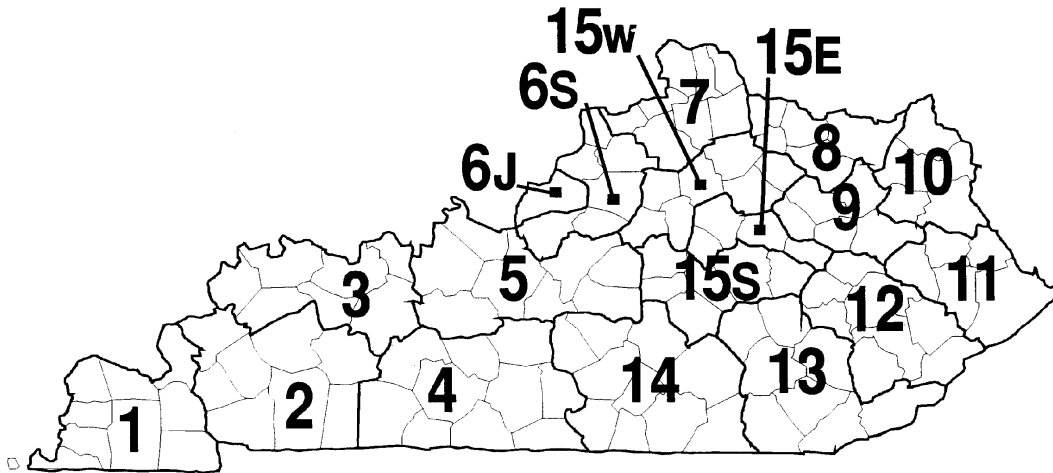
Services

Specific child service teams are convened to determine the needs of individual children. After a service plan is developed, it is submitted to the appropriate Regional Interagency Council (RIAC) for consideration. The RIAC may accept, modify or deny the services requested. Services are primarily those provided through existing funding streams in the participating agencies, coordinated by a case manager. However, modest "wraparound" funding can be used with approval of the RIAC to purchase other needed services that aren't normally funded. Call the Local Regional Office listed on the following page for more information about Kentucky IMPACT.

Service definitions

"Miscellaneous purchases" means items provided for use by the client or the client's family. This includes material items such as food, clothing, eyeglasses, toys, ramps, and school supplies. This service is sometimes referred to as "Wrap around".

"Case management services (Children Mental Health)" means services provided by a qualified professional which assist children with severe emotional disability and their families in gaining needed medical, educational, social, and other support services, including: assessing service needs, resources, child and family functioning; facilitating development of interagency service plan; coordinating services; assisting in accessing needed services; intervening in the environment to improve functioning of the child and family; developing community resources; performing advocacy activities; providing crisis assistance; consultation with other service providers; establishing and maintaining current client records; and performing reassessment of client needs. This service is commonly referred to as "service coordination".



1 - Purchase Region Counties: Ballard, Calloway, Carlisle, Fulton, Graves, Hickman, Livingston, Marshall, McCracken 270-442-9767	9 - Gateway Region Counties: Bath, Menifee, Montgomery, Morgan, Rowan 606-784-4161
2 - Pennyrile Region Counties: Caldwell, Christian, Crittenden, Hopkins, Lyon, Muhlenberg, Todd, Trigg 270-889-9891	10 - FIVCO Region Counties: Boyd, Carter, Elliott, Greenup, Lawrence 606-324-3005
3 - Green River Region Counties: Daviess, Hancock, Henderson, McLean, Ohio, Union, Webster 270-689-6500	11 - Big Sandy Region Counties: Floyd, Johnson, Magoffin, Martin, Pike 606-886-8572
4 - Barren River Region Counties: Allen, Barren, Butler, Edmonson, Hart, Logan, Metcalfe, Monroe, Simpson, Warren 270-842-0161	12 – Kentucky River Region Counties: Breathitt, Knott, Lee, Leslie, Letcher, Owsley, Perry, Wolfe 606-436-5761 x 212
5 - Lincoln Trail Region Counties: Breckinridge, Grayson, Hardin, LaRue, Marion, Meade, Nelson, Washington 270-352-2289 270-699-2701 (Lebanon office)	13 – Cumberland Valley Region Counties: Bell, Clay, Harlan, Jackson, Knox, Laurel, Rockcastle, Whitley 606-526-9459
6J - Jefferson Region Counties: Jefferson 502-589-8085	14 - Lake Cumberland Region Counties: Adair, Casey, Clinton, Cumberland, Green, McCreary, Pulaski, Russell, Taylor, Wayne 606-678-2768
6S - Salt River Region Counties: Bullitt, Henry, Oldham, Shelby, Spencer, Trimble 502-633-5683	15E - Bluegrass East Region Counties: Clark, Fayette, Jessamine, Powell 859-254-3106
7 – Northern Kentucky Region Counties: Boone, Campbell, Carroll, Gallatin, Grant, Kenton, Owen, Pendleton 859-491-1361	15W - Bluegrass West Region Counties: Anderson, Bourbon, Franklin, Harrison, Nicholas, Scott, Woodford 502-875-3772
8 – Buffalo Trace Region Counties: Bracken, Fleming, Lewis, Mason, Robertson 606-564-4016	15S - Bluegrass South Region Counties: Boyle, Estill, Garrard, Lincoln, Madison, Mercer 606-792-3081

IMPACT Plus

IMPACT Plus is a cooperative program among the Department for Medicaid Services (DMH), Department for Community Based Services (DCBS) and the Department for Mental Health and Mental Retardation Services (DMHMRS). The program serves children who are in custody of DCBS, under the supervision of DCBS, or at risk of institutionalization. The program provides a network of care for seriously emotionally disturbed children through regional interagency councils. There are fifteen (15) covered services that are individualized to meet the unique needs of each child in the IMPACT Plus Program. These services include: individual or group professional services, collateral services, medication management, therapeutic child support services, after school or summer program services, day treatment services, partial hospitalization services, intensive outpatient services, therapeutic foster care services, therapeutic group residential care services, residential crisis stabilization services, parent to parent support services, wilderness camp services and targeted case management.

Eligibility

A recipient shall be designated as at risk of institutionalization if the recipient: has been individually assessed by a qualified behavioral health professional and determined to require immediate short-term residential crisis stabilization as the sole service pursuant to 907 KAR 3:030E Section 3; or has a severe, persistent, clinically significant behavioral health disorder, other than mental retardation, dementia, or a personality disorder, listed in the “Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition Text Revision” or the replacement revision of such, published by the American Psychiatric Association; and has documentation of a severe behavioral health problem that persisted in the home, school, or community setting during the past six (6) months; and requires a coordinated plan of medically necessary community-based behavioral health services, in the absence of which there would be a substantial likelihood that the individual would require extensive institutionalization for behavioral health services.

Service definitions

“Targeted case management” is a set of activities that assist a recipient in accessing needed medical, social, educational, and other support services that shall: include all the following: an assessment of family strengths and needs; assistance in developing, coordinating, and accessing services in the collaborative service plan; facilitation of the implementation of a collaborative service plan; four (4) documented contacts per month including one (1) face-to-face contact with the recipient and one (1) face-to-face with the parent or guardian or primary caregiver; monitoring of the recipient’s progress and performing advocacy to assure appropriate, timely, and effective treatment and support services; participation in the development of other human service plans for the recipient; development of an appropriate plan of discharge from IMPACT Plus services for a recipient age nineteen (19) or above; and providing a recipient with a list of subcontractors authorized to provide a service pursuant to a collaborative service plan for the purpose of selecting a provider and providing information about the availability of a service pursuant to 907 KAR 1:034 if a service pursuant to IMPACT Plus is not available; and not include: the actual provision of a treatment; an outreach activity to a potential recipient; an administrative activity associated with Medicaid eligibility determination or application processing; institutional discharge planning; a transportation service; or a duplicate payment made to another public agency or private entity for the same purpose. A provider of targeted case management shall be a person who is employed by: the Department for Community Based Services as a case manager or social worker to an individual in

the custody of or under the supervision of the Department for Community Based Services; a community mental health center for the provision of Targeted Case Management Services in accordance with 907 KAR 1:525; or a behavioral health organization if the person has; a Bachelor of Arts or Sciences degree in a behavioral science from an accredited institution. A behavioral science shall include psychology, sociology, social work, human services, and special education; complete one (1) year post-graduate employment performing case management services or working directly with children. A Master's degree in a behavioral science can substitute for the one year of experience; completed a case management training program provided by the Department for Mental Health and Mental Retardation Services within six (6) months of the date of employment; and clinical supervision by a behavioral health professional, a behavioral health professional under clinical supervision, or a case manager who meets the requirements of this paragraph and has two (2) years of case management experience. Effective January 1, 2001, a subcontractor who provides targeted case management shall not provide targeted case management and another IMPACT Plus covered service to the same recipient unless such recipient is already enrolled in the IMPACT Plus program.

“Individual or group professional services” shall be face-to-face behavioral health therapy service specified in the recipient's collaborative service plan and provided to an individual or the individual's recipient in a group setting not to exceed eight (8) individuals; and be provided by a behavioral health professional or a behavioral health professional under clinical supervision.

“Collateral services” shall include consultation to a parent, legal representative, school personnel, or other persons with custodial control or supervision of an individual on behalf of the individual in accordance with the individual's treatment plan and be provided by a behavioral health professional or a behavioral health professional under clinical supervision.

“Medication prescription or management” shall be provided by a practitioner licensed in accordance with Kentucky Revised Statutes 311.271 (medicine, osteopathy, dentistry, podiatry, optometry, and chiropractic) or Kentucky Revised Statute Chapter 314.042 (advanced registered nurse practitioner).

“Therapeutic child support services” shall include supportive skills training provided to assist the family or individual in understanding, treating, identifying, or coping with the individual's behavioral health disorder. The service may be provided directly to an individual or family or to a group of individuals or families; formation and leadership of family support groups or therapeutic interventions and supports to youth transitioning to adulthood including: assessment of a youth's aptitude for vocational or skill training; monitoring of the youth's progress toward transition; or assistance with developing skills and emotional readiness for an independent living setting; behavioral management skills training including: therapeutic interventions and supports provided to a parent, guardian, or caregiver in implementing a behavioral management plan; individual or group instruction for the individual or parent, guardian, or caregiver on recognizing or coping with an individual's disruptive behaviors; or training the individual and parent, guardian, or caregiver of appropriate behaviors and supportive adult interventions. These services may be provided in the home.

“Parent-to-parent support service” shall be provided face to face to a recipient's parent, guardian, or caregiver and shall consist of: providing information about IMPACT Plus services including how

to effectively participate in the service planning process and how to access needed services, including emergency services; assisting in advocating on behalf of the recipient; providing information regarding the nature, purpose, and anticipated benefits obtained from accessing targeted case management and other IMPACT Plus services; assisting in understanding how to implement, and how to document implementation of, the recipient's behavior management plan; providing information concerning the scope of responsibility of the principle child-serving agencies; assisting in establishing and maintaining linkages with formal and informal supportive services; assisting in establishing and sustaining support groups for parents, guardians, and caregivers of recipients; or assisting in developing and implementing a plan to transition the recipient from IMPACT Plus services. A parent-to-parent support service shall be provided in accordance with the collaborative service plan by the parent of a child who has a behavioral health disorder and who has received at least one state funded service for that child's disability and who: is employed by a behavioral health professional or behavioral health organization; is approved by the Department for Mental Health and Mental Retardation Services following completion of ten (10) hours of initial and continuing annual training; is directly supervised by a behavioral health professional, behavioral health professional under clinical supervision, or a person meeting the requirements of 907 KAR 1: 001 subsection 3; and is supervised twice per month and individually once per month. A parent-to-parent support service shall be provided to a child who is not related to or living with the provider of the parent-to-parent support service.

"After school or summer program services" shall focus on the use of appropriate behaviors and social skills in group activities with other children; be provided by a behavioral health professional; and have continuous on-site supervision of a behavioral health professional; and a minimum child to staff ratio of eight (8) children to two (2) staff, one (1) of whom shall be a behavioral health professional or behavioral health professional under clinical supervision if the activity is psychotherapeutic.

"Day treatment services" shall consist of diagnostic, treatment, and rehabilitative services that are part of an organized, intensive behavioral health treatment program having unified policies and procedures approved by the local education authority and the provider that address program philosophy; admission and discharge criteria; admission process; discharge process; staff training; and integrated case planning. Services shall include psychotherapy; behavior management or social skills training; independent living skills training for youth age fourteen (14) and above; scheduled activities to promote parent or caregiver involvement and to empower the family to meet the individual's needs; services designed to explore and link with community resources before discharge and to assist the individual and family with transition to community services after discharge; and the development with the individual and parent or caregiver of a crisis plan for non-program hours; and be provided in collaboration with the special education services of the local education authority; on school days or during the summer; in coordination with the individual's educational plan and not as homebound instruction; by a behavioral health organization; under the supervision of a behavioral health professional; and through a linkage agreement with the local education authority that specifies the responsibility of the authority and provider.

"Partial hospitalization services" shall consist of an organized, intensive treatment program having unified policies and procedures accepted by the local education authority and the provider which address program philosophy; admission and discharge criteria; admission and discharge process;

staff training; and integrated case planning. The service is offered less than twenty-four (24) hours daily, five (5) to seven (7) days per week. Daily oversight and management by a psychiatrist that includes daily communication with staff delivering direct services and face-to-face contact with the individual one (1) or more times per week; continuous nursing coverage; multi-disciplinary treatment team; rehabilitative therapy; psychotherapy; medication evaluation, education, and management; behavior management or social skills training; treatment-based schooling provided by the local education authority as required by law; scheduled activities which promote family involvement; scheduled activities which promote family involvement; and the development with the individual and parent or caregiver of a crisis plan for non-program hours; be provided by a hospital licensed in accordance with 902 KAR 20.009 and 016 or 170; or a community mental health center; and through a linkage agreement with the local education authority that specifies the responsibility of the authority and the provider.

“Intensive outpatient services” shall consist of a structured comprehensive behavioral health program of individual and group therapeutic activities provided in accordance with the recipient’s collaborative service plan; have a minimum child to staff ratio of eight (8) children to two (2) staff, one (1) of whom shall be a behavioral health professional or behavioral health professional under clinical supervision; and be provided at least three (3) times per week for a minimum of two (2) hours per day by a behavioral health professional; a behavioral health professional under clinical supervision; a behavioral health organization or a facility licensed as Non-medical Alcohol Treatment and Education (NATE) or Drug Abuse Treatment and Education (DATE) intensive outpatient provider in accordance with 902 KAR 1:130 or 240 within its scope of practice. (Please note that effective April 12, 2000 NATE and DATE regulations dealing with intensive outpatient services have been modified to 908 KAR 1:370 Section 15)

“Therapeutic foster care services” shall be 24-hour therapeutic supervision and treatment in a family home provided by a therapeutic foster parent who receives weekly face-to-face clinical supervision and support by a behavioral health care professional or a behavioral health care professional under clinical supervision who is employed by a child-placing agency and shall develop and monitor an individualized behavior management plan that includes a crisis intervention plan; identified supports for the foster parent such as a foster support group; and a plan for the involvement and visitation of the individual with the birth family, guardian, or other significant persons unless prohibited by the court including overnight off-site family visits pursuant to the plan.

“Therapeutic group residential care services” shall be 24-hour therapeutic supervision and behavioral health treatment in a group residential facility provided by professional and support staff who receive weekly on-site clinical supervision and continuing consultation and support by a behavioral health professional or a behavioral health professional under clinical supervision who shall develop and monitor weekly a residential treatment plan that includes an individualized behavior management plan, a crisis plan, a plan for the involvement and visitation of the individual with birth family, guardian, or other significant persons unless prohibited by the court including overnight off-site family visits pursuant to the plan. Services shall be provided by a child-caring facility licensed in accordance with 922 KAR 1:300; or a facility licensed as a NATE or DATE residential service provider in accordance with 902 KAR 1:100 or 230 within the scope of this

practice. (Please note that effective April 12, 2000 NATE and DATE regulations dealing with residential treatment services have been modified to 908 KAR 1:370 Section 12)

“Residential crisis stabilization services” shall consist of a brief stay not to exceed ten (10) consecutive days in a structured community-based therapeutic environment. Services include behavioral health assessment or evaluation; psychotherapeutic and other behavioral health interventions necessary to stabilize the crisis; and discharge planning to link the individual with community services and supports; be provided by a child-caring facility licensed in accordance with 922 KAR 1:300; a facility licensed as a NATE or DATE residential service provider in accordance with 902 KAR 1:100 or 230 within its scope of practice; a hospital licensed in accordance with 902 KAR 20.009 and 016 or 170; or a community mental health center; and have a behavioral health professional who is on site or on call 24 hours per day, seven (7) days per week. (Please note that effective April 12, 2000 NATE and DATE regulations dealing with residential treatment services have been modified to 908 KAR 1:370 Section 12)

“Wilderness camp services” shall consist of a structured program of individual and group activities. Services shall include activities that build social competencies, increase self esteem, and assist youth to learn and practice skills that provide for greater control of personal behaviors; and overnight experiences in an outdoor environment; be provided by a child care facility licensed in accordance with 922 KAR 1:300 and have a behavioral health professional or a behavioral health professional under clinical supervision on-site or on call at all times.

Waiting list

The vast number of IMPACT Plus providers enrolled across the state ensures timely access to behavioral health care services. Children and youth often need and receive immediate intervention such as crisis stabilization. However, there is an occasional waiting period between the time of which the regional interagency council determines eligibility, the family receives a freedom of choice among targeted case management providers, and the contact information from the chosen case management agency. Additionally, Regional Benefit Coordinators communicate with regional interagency councils to determine the need for additional provider recruitment and enrollment when needed.

Contact the Impact Plus Coordinator, Department for Mental Health and Mental Retardation Services, 100 Fair Oaks Lane, Frankfort, KY 40621 or telephone 1 800 374 9146 or TTY 502 564 5777. Further details are available on the Internet at <http://dmhmrs.chr.state.ky.us/cysb/impact.htm>

Kentucky Assistive Technology Services Network (KATSN)

The Kentucky Assistive Technology Services Network is a Division of the Department for the Blind that provides technical assistance about assistive technology services and devices to improve the quality of their lives. It consists of a statewide network of organizations and individuals that enhance the availability of assistive technology devices and services to improve the productivity and quality of life for individuals with disabilities. Through advocacy and capacity building efforts, the mission of this collaborative system is to make assistive technology information, devices and services easily obtainable for people of any age and/or disability.

In addition to the Coordinating Center located in the McDowell Center in Louisville, there are four assistive technology regional resource centers and two satellite centers. They are:

Assistive Technology Regional Resource Centers at:

Bluegrass Technology Center
169 N. Limestone St.
Lexington, KY 40507
Phone 800-209-7767
TTY 859-255-9951

Enabling Technologies
301 York St.
Louisville, KY 40203
TTY/Phone 800-890-1840
TTY 502-574-1637

Western Kentucky Assistive
Technology Consortium
607 Poplar St., PO Box 266
Murray, KY 42071-0266
Phone 800-209-6202

Redwood Assistive Technology Center
71 Orphanage Road
Fort Mitchell, KY 41017
Phone 800-728-9807

Appalachia Assistive Technology Consortium

Carl Perkins Rehabilitation Center
5659 Main Street
Thelma, KY 41260-8609
Phone 800-443-2187
TTY 877-600-6111

Cumberland River Comprehensive Care Center
1203 American Greeting Card Road
PO Box 568
Corbin, KY 40702
Phone 606-526-7081

Eligibility

Persons with disabilities that need to increase, maintain or improve functional capabilities are eligible for assistive technology services.

Services

“Assistive technology” means any item, piece of equipment, or product system, whether acquired commercially, off-the-shelf, or customized, that is used to increase, maintain, or improve functional capabilities of individuals with disabilities.

The types of assistive technology are divided into the following categories:

Aids for Daily Living,
Augmentative Communication,

Computer Applications,
Environmental Control Systems,
Home/Worksite Modifications,
Prosthetics and Orthotics,
Seating and Positioning,
Aids for Vision/Hearing Impaired,
Wheelchair/Mobility Aids,
Vehicle Modifications.

Loan of assistive devices via loan libraries (operated in the regional resource centers above).

Funding information and referral on assistive technology services and devices.

Assistive technology information and referral, assessments and evaluations

Consultation on appropriate technologies

Training

Technical assistance

No Waiting List at the current time.

Contact the Kentucky Assistive Technology Service Network, Workforce Development Cabinet,
Department for the Blind, Charles McDowell Center, 8412 Westport Road, Louisville, Kentucky
40242 or call 800-327-5287 or 502-327-0022.

Further details are available on the Internet at <http://www.katsnet.org>

Kentucky Children's Health Insurance Program (KCHIP)

The Kentucky Children's Health Insurance Program extends Medicaid coverage for children from birth up to their nineteenth (19) birthday. The health department in each Kentucky county serves as an outreach vehicle for KCHIP. They can assist with application preparation and answer questions regarding the program.

Eligibility

Family income must be at or below 200% of the Federal poverty level. The child must not already have health insurance. The family has not voluntarily dropped health insurance on the child within the past six (6) months. When the Department for Community Based Services determines eligibility they first determine if the child is eligible under traditional Medicaid. (Traditional Medicaid covers children birth to one (1) who are 185% poverty or below, ages 1-5 at 133% poverty level or below, and ages 6-18 at 100% of poverty or below.)

Services

Benefits are the same as traditional Medicaid (except there are certain restrictions on EPSDT services and non-emergency transportation which are not covered for phase III participants i.e. 151% to 200% of Federal poverty level).

Services include:

- Inpatient Hospital
- Outpatient Hospital
- Emergency Services
- Outpatient Surgery
- Physician, Nurse Practitioner, and Primary Care Services
- Early and Periodic Screening, Diagnosis and Treatment (Well child care and Special services)
- Preventive Services in Health Departments
- Vision Care
- Hearing Care
- Dental Services
- Family Planning Services
- Pharmacy
- Lab and X-ray
- Home Health
- Physical Therapy, Speech Therapy, and Occupational Therapy (limited settings)
- Medical Equipment and Supplies
- Transportation (emergency)
- Renal Dialysis
- Hospice
- Nursing Home Care
- Inpatient Mental Health Services
- Outpatient Mental Health Services
- Early intervention for infants and toddlers with disabilities
- Services provided by school districts for children with disabilities
- Some additional specialized services for people with disabilities

No Waiting List at this time.

Contact the KCHIP Program, Department for Medicaid Services, 275 E. Main Street, Frankfort, KY 40621 or telephone 877-524-4718 for additional information.

Further details are available on the Internet at <http://cfc-chs.chr.state.ky.us/chs/kchip/kchip.htm>

Mothers Against Drunk Driving

The mission of Mothers Against Drunk Driving (MADD) is to stop drunk driving, support victims of this crime, and prevent underage drinking. MADD offers support, guidance, referrals and information for people whose loved ones have been injured or killed in alcohol-related crashes. While MADD's name includes the word "mothers" it provides services for all persons victimized by the crime of drunk driving, regardless of gender, race, ethnicity, or age.

Eligibility

MADD is a grass-roots nonprofit organization whose members come from all walks of life. MADD is composed of citizens who are concerned with the problem of impaired driving and are willing to take action to address the problem.

Services

"Victim advocacy" – a MADD victim advocate can offer emotional support and provide information by phone or in person. Many of MADD's advocates have been victims of crashes themselves. Frequently victim advocates are available to offer support during the court trial or parole hearing, and will assist the individual prepare a victim's impact statement for conviction and sentencing.

"Information" – MADD has a wide selection of free publications for victims of crashes. An advocate can deliver this information or it can be mailed to the person requesting assistance. One publication is entitled, "Closed Head Injury: A Common Complication of Vehicular Crashes".

"Application assistance" – If financial assistance is needed, an advocate can assist the individual in obtaining and filling out an application for Crime Victims Compensation.

"Referral" – a MADD victim advocate can refer the individual to other agencies that provide needed services. The victim's advocate can provide a list of professional counselors skilled in working with crash victims.

"Support groups" – many MADD chapters offer victim support groups where individuals can meet other families that share experience.

"Victim impact panel" – many MADD members serve as speakers on victim impact panels where they discuss their experience with offenders convicted of driving under the influence of alcohol or other drugs.

Contact Mothers Against Drunk Driving, PO Box 274, Harrodsburg, KY 40330 or call their toll-free telephone number 800-944-6233. Further details are available on the Internet at <http://madd.org>

Personal Care Attendant Services Program

The Personal Care Attendant Services Program operates under 910 KAR 1:090. A personal care attendant, hired by the physically disabled adult, helps with personal care, housekeeping, shopping, travel, self-care procedures, meal preparation, and other day-to-day activities. There are approximately 600 persons on the waiting list for this program statewide. Office of Aging Services, Cabinet for Health Services contracts with fifteen (15) Area Agencies on Aging (that are part of the 15 Area Development Districts) for services to aging persons statewide. State and local funds are used by local organizations to provide services and programs that help maintain older persons in their own homes

Eligibility

To be eligible for participation in the personal attendant care services program a person shall be eighteen (18) years of age or older; be severely physically disabled (as defined by KRS 205.900(6) i.e. functional loss of 2 or more limbs); need not less than fourteen (14) hours of attendant care per week or need an attendant overnight; reside, or through this program be able to reside, in a non-institutional setting; agree to evaluation of the individual's eligibility for personal care services by an evaluation team from a qualified agency or organization; be mentally capable of recruiting, hiring, firing, and suspending attendants; agree that the need for continuing attendant care shall be subject to an initial evaluation and re-evaluations at yearly intervals; work with the program coordinator in establishing a personal care plan as the basis of agreement between the disabled person and the attendant; and be capable of preparing attendant payroll reports and required employer tax statements.

Waiting Lists vary from district to district.

Contact the Office of Aging Services, Cabinet for Health Services, 100 Fair Oaks Lane, Frankfort, KY 40601, telephone 502-564-6930 or contact the local Area Agency on Aging for more information.

Kentucky Area Agencies on Aging

Purchase Area
100 Medical Drive
Mayfield, KY 42066-0588
Phone 270-247-7171

Pennyrile Area
300 Hammond Drive
Hopkinsville, KY 42240
Phone 270-886-9484

Green River Area
3860 US Highway 60 West
Owensboro, KY 42301-0200
Phone 270-926-4433

Barren River Area
177 Graham Avenue
PO Box 90005
Bowling Green, KY 42102-9005
Phone 270-781-2381

Lincoln Trail Area
613 College Street Road
PO Box 604
Elizabethtown, KY 42702-0604
Phone 270-769-2393

Kentuckiana Regional Planning
Development Agency
11520 Commonwealth Drive
Louisville, KY 40299
Phone 502-266-6084

Northern Kentucky Area
16 Spiral Drive
PO Box 668
Florence, KY 41022-0668
Phone 859-283-1885

Buffalo Trace Area
327 West Second Street
PO Box 460
Maysville, KY 41056
Phone 606-564-6894

Gateway Area
Courthouse Annex, Main Street
PO Box 1070
Owingsville, KY 40360
Phone 606-674-6355

Fivco Area
PO Box 636, 3000 Louisa Street
Catlettsburg, KY 41129-0636
Phone 606-739-5191

Big Sandy Area
100 Resource Drive
Prestonsburg, KY 41653
Phone 606-886-2375

Kentucky River Area
381 Perry County Park Road
Hazard, KY 41701
Phone 606-436-3158

Cumberland Valley Area
342 Old Whitley Road
PO Box 1740
London, KY 40743-1791
Phone 606-864-7391

Lake Cumberland Area
2384 Lakeway Drive
PO Box 1570
Russell Springs, KY 42642
Phone 270-866-4200

Bluegrass Area
699 Perimeter Drive
Lexington, KY 40517
Phone 859-269-8021

Substance Abuse Program

The Cabinet for Health Services, Department for Mental Health and Mental Retardation Services has contracts for the provision of community-based non-medical services for the prevention and treatment of substance abuse via a network of regional Comprehensive Care Centers and their affiliate programs. These regional programs offer a wide array of services and supports to individuals and families that are high risk for developing substance abuse problems. The chief delivery systems for prevention and early intervention services are the regional prevention centers. For persons with treatment needs, the Comprehensive Care Centers offer an array of services that include residential and outpatient options.

Eligibility

Any person that is considered at risk for developing a substance abuse related problem is eligible for substance abuse prevention services. Persons that have been identified as “misusing” drugs and/or alcohol are eligible for early intervention programs (i.e. student assistance programs, driving under the influence program, or employee assistance programs). However, these specialized services for high risk populations are not uniformly available in all regions. Persons that are determined to have a diagnosis of substance abuse or substance dependence are eligible for treatment. The type and duration of treatment depends on the severity of the substance abuse problem and on the availability of treatment resources.

Service Definitions

“Diagnostic Interview” means assessment by a qualified professional other than a psychiatrist during the intake process and includes one or more of the following: history, mental status examination, psychosocial, or assessment of other socio-economic needs/services.

“Assessment DUI” means a procedure applied to a person convicted of Driving Under the Influence of alcohol or other mind altering substances that includes the administration of a computerized assessment instrument; a structured interview; a determination by the assessor of the client’s substance abuse, education or treatment needs; a discussion of available options to receive these needed services; and referral to services that provide an appropriate level of care in relation to the client’s needs as determined by the assessment.

“Psychiatric Diagnostic Evaluation” means a psychiatric diagnostic interview and examination including history, mental status, or disposition, may include communication with family or other sources, ordering and medical interpretation of laboratory or other medical diagnostic studies. It may include diagnostic review of medications, diagnostic review and interpretation of physical examination from an outside physician. Does not include consultation for psychiatric evaluation of a patient.

“Psychological testing” means psychological evaluation.

“Substance Abuse Transitional” means a residential program, which provides an organized therapeutic environment in which the substance abuser may receive, vocational rehabilitation, outpatient counseling and other support services.

“Substance Abuse Residential” means a residential service, post withdrawal, provided to persons with a primary or secondary diagnosis of alcohol or drug abuse or dependency. Services designed to reduce or eliminate alcohol or drug abuse behavior and dependency. The service includes regular group and individual counseling and accessible supportive services such as, education, vocational rehabilitation, self-help groups, medical, laboratory or legal services.

“Substance Abuse Family Residential” means residential treatment post withdrawal, which shall be provided to women with special focus for pregnant women and women with dependent children. Those women shall have a primary diagnosis of alcohol dependency or drug dependency. This service includes case management, regular group therapy, individual counseling, family education and counseling, parenting education, physical, sexual and emotional abuse education, and substance abuse education conducted by trained personnel under the supervision of a qualified professional. Specialized services for the dependent children shall be provided as a necessary component of treatment. Those services to children include a comprehensive individual assessment of the child’s needs, childcare, public education, education on substance abuse, recreation and case management, and referral for appropriate mental health, mental retardation and developmental disabilities services.

“Detoxification (Non-medical)” means supervised management, in a 24 hour, non-medical facility, of physical and psychological withdrawal symptoms from a substance to which the individual has been addicted or abusing, and an assessment of the individual’s need for further care and/or referral to appropriate resources.

“Detoxification (Medical)” means medically supervised management, utilizing a hospital, of physical and psychological withdrawal symptoms from a substance to which the individual has been addicted or abusing, and an assessment of the individual’s need for further care and/or referral to appropriate resources. Daily physician over-sight is required.

“Individual therapy” means a therapeutic service provided by a qualified professional other than a psychiatrist.

“Individual therapy (psychiatrist)” means a therapeutic service provided by a psychiatrist.

“Group therapy” means therapeutic service by a qualified professional provided to individuals in a group setting.

“Intensive Outpatient (Substance Abuse)” means a highly structured, intensive substance abuse rehabilitation program provided for individuals and their families that are experiencing problems related to alcohol or drug abuse or dependency. Includes assessment and diagnosis, education regarding the dynamics of chemical dependency and co-dependency, individual counseling, group counseling, family education and structured recreational activities.

“Case management (Substance Abuse)” means contact by a qualified professional or under the supervision of a qualified professional to assist the client in accessing or effectively utilizing health, social, or other supportive human services. Services may include: face-to-face contacts with or on

behalf of a client; service travel connected with a service to a client; case consultation outside of the center; and assessment activities.

“Substance Abuse Pregnant Women Services (Not Otherwise Specified)” means services provided to substance abusing women which are not specified elsewhere. Includes intensive outpatient, residential, prevention services, and community supports.

“DUI education services” means an education course approved by the Division of Substance Abuse which delivers information about alcohol and other drugs to increase awareness and knowledge about the risks of alcohol and drug use to develop skills to change clients’ attitudes and behaviors in relation to alcohol and other drug abuse.

Waiting List

The accessibility and availability of substance abuse services varies from region to region.

Contact the Division of Substance Abuse, 100 Fair Oaks Lane, Frankfort, KY 40601 or telephone at 502-564-2880 for more information. Further details are available on the Internet at <http://dmhmrs.chr.state.ky.us/sa> or contact the nearest Comprehensive Care Center regional office listed below.

Comprehensive Care Regions	toll-free phone numbers
Four Rivers (Paducah)	800-592-3980
Pennyroyal (Hopkinsville)	800-264-5163
River Valley (Owensboro)	800-433-7291
Lifeskills (Bowling Green)	800-223-8913
Communicare (Elizabethtown)	800-641-4673
Seven Counties (Louisville)	800-221-0446
North Key (Covington)	877-331-3292
Comprehend (Maysville)	606-564-4016 (call collect)
Pathways (Ashland)	800-562-8909
Mountain (Prestonsburg)	800-422-1060
Kentucky River (Jackson)	800-262-7491
Cumberland River (Corbin)	606-864-2104 (call collect)
Adanta (Somerset)	800-633-5599
Bluegrass (Lexington)	800-928-8000

Supported Living Program

Supported Living means providing people with disabilities the individualized help they need to live successfully in a home of their choice. This program was authorized by Kentucky Revised Statutes 210.770-795 and 908 Kentucky Administrative Regulation 2:080 and 2:190. The program consists of 14 regional Supported Living Councils that review applications for funding. Applications are due April 1 each year. Applications are evaluated based on Supported Living principles (36%), potential for success (24%), need (18%), accountability (12%), and overall quality of the application (10%). Awards are effective July 1 each year. Applications can be obtained through the Supported Living coordinators in each of the Regional Mental Health and Mental Retardation Boards. Supported Living grants shall not be used for on-going rent or mortgage payments, payments of a medical insurance premium or unpaid medical bill, supplementation of wages for staff in other publicly-funded programs, modifications costing over \$2,500 to rental property, a home improvement not related to a person's disability, rental of a vehicle for more than 30 days in a fiscal year, purchase of a vehicle, living arrangements that include more than 3 people who are eligible for Supported Living unless all are related legally or biologically as a family unit, equipment or service which is obtainable from another program for which the applicant qualifies, and tuition or fees for a program or activity lasting more than 30 days if during that fiscal year a majority of participants are eligible to apply for Supported Living grant. The types of services and benefits funded by the Supported Living Council include home modifications, personal care attendant, respite, help with home purchase or upkeep, skill development, transportation, automotive modification, therapy, and assistive technology.

Eligibility

Kentuckians that qualify for the Americans with Disabilities Act (all ages) are eligible to apply for Supported Living assistance.

Service definitions

"Adaptive and therapeutic equipment" means an item recommended by a physician, or therapist who promotes the recipient's independent functioning and communication.

"Home modifications" means an architectural change, ramp, widening of doors, or other adaptation, which need to be made to the recipient's place of residence to accommodate that person's disability.

"Homemaker services" means cooking, cleaning, shopping, laundry housekeeping and practical assistance in maintaining the recipient's household.

"Personal care services" means assistance with feeding, bathing, dressing, transferring, turning, repositioning, activities of daily living, and if necessary, ambulation and emergency procedures.

"Start-up grants" means an award of funds to a recipient for one time expenses limited to a security deposit, down payment not to exceed 10 percent of the purchase price, closing costs for a home, purchase of furniture or equipment.

“Supported living community resource developer” means a person who coordinates and assists a recipient to develop friendships, opportunities, networks, in the community on an individualized basis.

“Transportation” means a service or mileage reimbursement for a person who transports the recipient to work or community activities.

Waiting List

There is a waiting list for Supported Living Program support. Grants are awarded at the beginning of each fiscal year and there are more applicants than funds to fulfill all requests.

Contact the Supported Living Program, Division of Mental Retardation, 100 Fair Oaks Lane, Frankfort, KY 40601 or telephone 502-564-7702 for additional information. Further details are available on the Internet at <http://dmhmrs.chr.state.ky.us/supportedliving> or consult the Regional Supported Living Coordinator at the telephone number listed below.

Four Rivers Behavioral Health serving Ballard, Calloway, Carlisle, Hickman, Fulton, McCracken, Graves, Marshall, and Livingston Counties 270-442-5088

Pennyroyal Mental Health and Mental Retardation Board serving Caldwell, Christian, Crittenden, Hopkins, Lyon, Muhlenberg, Todd and Trigg Counties 270-886-2205

River Valley Behavioral Health serving Daviess, Hancock, Henderson, McLean, Ohio, Union, and Webster 270-689-6500

Lifeskills serving Allen, Barren, Butler, Edmonson, Green, Hart, Logan, Metcalfe, Simpson, and Warren 270-842-2274

Communicare serving Breckinridge, Grayson, Hardin, Larue, Marion, Meade, Nelson, and Washington Counties 270-769-3377

Seven Counties Services serving Bullitt, Henry, Jefferson, Oldham, Shelby, Spencer, and Trimble Counties 502-459-5292

North Key serving Boone, Campbell, Carroll, Gallatin, Grant, Kenton, Owen, and Pendleton Counties 859-654-6988

Comprehend serving Bracken, Fleming, Lewis, Mason, and Robertson Counties 606-759-7161

Pathways serving Bath, Boyd, Carter, Elliott, Greenup, Lawrence, Menifee, Montgomery, Morgan, and Rowan Counties 606-329-8588 (extension 170)

Mountain Regional Mental Health and Mental Retardation Board serving Floyd, Johnson, Magoffin, Martin, and Pike Counties 606-886-4373

Kentucky River Community Care serving Breathitt, Knott, Lee, Leslie, Letcher, Owsley, Perry, and Wolfe Counties 606-666-8770

Cumberland River Regional Mental Health and Mental Retardation Board serving Bell, Clay, Harlan, Jackson, Knox, Laurel, Rockcastle, and Whitley Counties 606-528-7010 (extension 231)

Adanta Behavioral Health serving Adair, Casey, Clinton, Cumberland, Green, McCreary, Pulaski, Russell, Taylor, and Wayne Counties 606-679-4782

Bluegrass Regional Mental Health and Mental Retardation Board serving Anderson, Boyle, Bourbon, Clark, Estill, Fayette, Franklin, Garrard, Harrison, Jessamine, Lincoln, Madison, Mercer, Nicholas, Powell, Scott, and Woodford 859-272-7483

Supports for Community Living Program

Supports for Community Living is a Home and Community-based Waiver under the Kentucky Medicaid Program and was developed for Kentucky residents as an alternative to institutional care for individuals with mental retardation or developmental disabilities.

Eligibility

Individuals with mental retardation or developmental disabilities that meet the requirements for residence in an Intermediate Care Facility for persons with mental retardation or other conditions (ICF/MR), and who meet other Medicaid requirements. If a person qualifies under the developmental disability provision then onset must occur before age twenty-two (22).

Services

“Support coordination”- the person who helps the individual and/or the family to develop a plan to meet the individual’s needs is called the support coordinator. The support coordinator also works closely with the individual to make sure he/she is pleased with the services he/she receives.

“Residential supports”- options include a family home, staffed residence (a small individualized home), or a group home. Residential supports provide 24-hour supervision, and training in activities such as laundry, routine household chores, self-care, shopping, money management, socialization, and leisure activities. No more than 3 individuals receiving waiver services can live in any residential setting.

“Community habilitation”- provides training for the individual usually during the day, in a place other than home. This training can include learning how to use money, using community resources, learning how to communicate better or how to get along with others.

“Supported employment”- is training or assistance to an individual who does not live in one of the residential supports mentioned above. This can include a variety of activities such as shopping, household care, taking part in community activities as long as the individual is being taught skills during the activity.

“Behavior supports”- because some individuals act differently, they may not always be accepted by others. Behavioral supports are ways to enable individuals to make changes in their lives or environment so others will accept them.

“Psychological services”- is the administration of psychological testing for diagnosis. Evaluation and treatment as indicated by the individual. Dually diagnosed individuals may need this service to coordinate treatment for mental illness and psychological conditions such as emotional instability.

“Occupational therapy”- is the therapeutic use of self-care, work, and play activities to increase and enhance development. This may include adaptation of tasks or environment to achieve maximum independence and to enhance quality of life. Occupational therapists (who must be licensed), work closely with individuals and groups in promoting health, preventing illness or disability and helping people with illness or disability to achieve as high a level of independence and quality of life as possible.

“Physical therapy”- is used to prevent, correct or minimize physical handicaps, to alleviate pain and to improve functional ability. Physical therapists are licensed health care professionals who evaluate and treat people with health problems resulting from injury or disease. Treatment includes therapeutic exercise, cardiovascular endurance training and training in self-care.

“Speech therapy”- assists an individual in improving communication and is provided by a licensed professional.

“Respite”- is a time of rest or relief for those persons normally caring for an individual. This service is only available to an individual in a family home or in their own residence, and not for those living in a group home or staffed residence.

“Wellness monitoring”- a registered nurse evaluates the level of medical wellness of an individual at risk of medical complications, determines if an individual is properly using medical health services provided and determines if the health of an individual is sufficient to maintain him/her in his/her place of residence with the support of more frequent skilled nursing intervention.

“Personal Emergency Response System”- an electronic device which enable an individual at high risk of needing assistance to secure help in an emergency situation.

“Specialized medical equipment and supplies”- may be covered when unavailable through the Medicaid durable medical equipment, vision or dental programs.

Waiting List

There are approximately 1600 persons on the current waiting list. Persons can be placed on an emergency waiting list if death or loss of the immediate care provider occurs, or the immediate care provider has an emergency hospitalization. Currently 102 persons are on the emergency waiting list (this number is included in the 1600 above).

Contact the Division of Mental Retardation, 100 Fair Oaks Lane, Frankfort, KY 40601 or telephone 502- 564-7702 for additional information. Further details are available on the Internet at <http://dmhmrs.chr.state.ky.us/scl/>

Additional Resources

Commission on the Deaf and Hard of Hearing

The Kentucky Commission on the Deaf and Hard of Hearing (KCDHH) acts as an advocate for deaf and hard of hearing persons regarding legislative issues, state and local government policies, and programs that pertain to people with hearing loss. KCDHH provides information to the public and coordinates an Interpreter Referral Service. Publications produced by KCDHH include Directory of Services, Communicator, Interpreter Directory, and brochures on topics of interest to deaf and hard of hearing persons and their families. A library of books, videotapes, periodicals are also available for research and general information. A TDD Distribution Program also provides specialized telecommunications equipment (TTY's, amplified phones, etc.) for eligible Kentuckians.

Further details are available on the Internet at

<http://www.state.ky.us/agencies/kcdhh/home/agency.html> or call 502-573-2604 (voice or TTY) or 800-372-2907 (voice or TTY)

Food Stamps

The Food Stamp Program assists low income individuals to obtain basic nutritious food assistance. Eligibility includes special requirements for aged and disabled which determine the amount of coupons granted.

Further details are available on the Internet at <http://cfc-chs.chr.state.ky.us/dcbs.htm> or telephone 502-564-7536.

Selected Housing Resources

RENTAL HOUSING:

Section 8 Rental Assistance

This is a program that assists low-and very low-income families in obtaining decent, safe and sanitary housing in private accommodations. This assistance is considered "tenant based" rental assistance as a tenant can take their assistance with them if they decide to move to another approved unit. HUD makes up the difference between what a low- and very low-income household can afford and the approved rent for an adequate housing unit. Application for Section 8 assistance can be made to Kentucky Housing Corporation in most primarily rural counties (**800-633-8896**) or to local public housing authorities in larger urban areas (e.g., Louisville, Lexington, Owensboro, Covington).

Public Housing

Public housing authorities (PHAs) sponsor rent assisted multi-family rental housing in most communities around the Commonwealth. Eligible households generally pay 30% of their income for rent. Rental assistance is tied to the housing unit, instead of "tenant based" rental assistance which is tied to the family.

Other Assisted Housing

"Assisted housing" generally means housing which is designed for low and very-low income households and which is typically rent assisted. Examples of assisted housing include the Rural Housing Services (RHS) Section 515 program, the HUD 202 program for the elderly, the HUD 811 program for persons with disabilities, and the HUD 236 program for the elderly. Kentucky Housing Corporation publishes a directory of available assisted housing (by county). For more information call 800-633-8896. Further details are available on the Internet at <http://www.kyhousing.org>.

Rental Deposits Surety Program

This program (sponsored by Kentucky Housing Corporation) helps very low-income persons or families pay utility and security deposits when moving into a rental housing unit. By easing the renter's first month's budget in obtaining housing, this program allows very low-income tenants to acquire safe, decent and sanitary housing. For more information please call 877-552-7362.

HOMEOWNERSHIP OPTIONS:

Rural Housing Services Section 502 Home Ownership Loans

Loans are made to families or individuals who are without adequate housing and who are unable to obtain loans from private lenders at reasonable rates. They must have sufficient income to meet loan payments and have a satisfactory credit history that indicates a willingness and ability to meet

loan obligations. These loans may be made at reduced interest rates and for longer loan terms. Interest rates and loan terms vary from 1% to market rate (interest), and from 33 to 38 years (term). Loan payments may be adjusted based on changes in income, and recapture may apply upon sale of a home financed under this program. For more information please call 606-224-7300

Kentucky Housing Corporation Housing Trust Fund

KHC provides very low-interest (1 to 6 percent) single-family home loans to eligible families demonstrating special housing needs. The program operates through local lenders like the regular single-family program. Funds are allocated as they become available, approximately every four months. For more information call 800-633-8896. Further details are available on the Internet at <http://www.kyhousing.org>.

Habitat for Humanity

Families interested in homeownership apply to local Habitat projects. A family selection committee chooses homeowners based on their level of need, their willingness to become partners in the program and their ability to repay the loan. Each homeowner is required to invest "sweat equity" hours into the construction of their home. Contact individual Habitat affiliates for more information at 229-924-6935 extension 2551. Further details are available on the Internet at <http://www.habitat.org>.

Federation of Appalachian Housing Enterprises

The Federation of Appalachian Housing Enterprises (FAHE) is comprised of member nonprofit housing development corporations in eastern Kentucky. The majority of FAHE members are involved in developing homeownership opportunities for low-income families in the community. Currently, FAHE members are located in Harlan (Christian Outreach with Appalachian People), Morehead (Frontier Housing, Inc.), Neon (Housing-Oriented Ministries Established for Service), Manchester (Kentucky Mountain Housing Development Corporation), and Vanceburg (People's Self-Help Housing). Contact individual member organizations. For more information please call 606-986-2321.

EPIC

Equity Partners Investing in the Commonwealth or EPIC came into being in 1990 when 24 of the state's most progressive financial institutions and KHC combined resources to form a \$20 million fund to help eligible Kentuckians finance up to 60 percent (up to \$3,000) of the down payment and closing costs associated with the purchase of a home. Contact KHC or participating lenders. For more information call 800-633-8896. Further details are available on the Internet at <http://www.kyhousing.org>.

IN-HOME SUPPORT:

HOUSING RESOURCE GUIDES:

Two excellent resource guides are available through Kentucky Housing Corporation. These include "Assisted Rental Housing in Kentucky" (June, 1999) and the "Housing Resource Manual" (1994). These are available by phoning Kentucky Housing Corporation.

PHONE NUMBERS:

Kentucky Housing Corporation - 502/564-7630

Rural Housing Services (formerly Farmers Home Administration) – 606/224-7300

Division of Mental Health/Housing Coordinator/Lou Kurtz - 502/564-4448

Kentucky Housing Corporation/Supported Housing Specialist/Jim Sparks - 502/564-7630, EXT 364

Supported Living Program

Supported living means providing people with disabilities the individualized help they need to live successfully in a home of their choice. This is in contrast to residential services, which group people with disabilities in residential facilities for the purpose of training or treating or caring for them. Funds are available through regional Supported Living Councils created by House Bill 447. Applications are available from a number of organizations including local community mental health/mental retardation centers. For more information regarding the Supported Living Program in each region of Kentucky please consult with the Community Mental Health Center listed below.

Four Rivers Behavioral Health serving Ballard, Calloway, Carlisle, Hickman, Fulton, McCracken, Graves, Marshall, and Livingston Counties 270-442-5088

Pennyroyal Mental Health and Mental Retardation Board serving Caldwell, Christian, Crittenden, Hopkins, Lyon, Muhlenberg, Todd and Trigg Counties 270-886-2205

River Valley Behavioral Health serving Daviess, Hancock, Henderson, McLean, Ohio, Union, and Webster 270-689-6500

Lifeskills serving Allen, Barren, Butler, Edmonson, Green, Hart, Logan, Metcalfe, Simpson, and Warren 270-842-2274

Communicare serving Breckinridge, Grayson, Hardin, Larue, Marion, Meade, Nelson, and Washington Counties 270-769-3377

Seven Counties Services serving Bullitt, Henry, Jefferson, Oldham, Shelby, Spencer, and Trimble Counties 502-459-5292

North Key serving Boone, Campbell, Carroll, Gallatin, Grant, Kenton, Owen, and Pendleton Counties 859-654-6988

Comprehend serving Bracken, Fleming, Lewis, Mason, and Robertson Counties 606-759-7161

Pathways serving Bath, Boyd, Carter, Elliott, Greenup, Lawrence, Menifee, Montgomery, Morgan, and Rowan Counties 606-329-8588 (extension 170)

Mountain Regional Mental Health and Mental Retardation Board serving Floyd, Johnson, Magoffin, Martin, and Pike Counties 606-886-4373

Kentucky River Community Care serving Breathitt, Knott, Lee, Leslie, Letcher, Owsley, Perry, and Wolfe Counties 606-666-8770

Cumberland River Regional Mental Health and Mental Retardation Board serving Bell, Clay, Harlan, Jackson, Knox, Laurel, Rockcastle, and Whitley Counties 606-528-7010 (extension 231)

Adanta Behavioral Health serving Adair, Casey, Clinton, Cumberland, Green, McCreary, Pulaski, Russell, Taylor, and Wayne Counties 606-679-4782

Bluegrass Regional Mental Health and Mental Retardation Board serving Anderson, Boyle, Bourbon, Clark, Estill, Fayette, Franklin, Garrard, Harrison, Jessamine, Lincoln, Madison, Mercer, Nicholas, Powell, Scott, and Woodford 859-272-7483

Legal Services

Access to Justice Foundation

The Access to Justice Foundation is a poverty law resource center dedicated to providing opportunity for quality civil legal assistance for low-income Kentuckians. For more information call 859-255-9913. Further details are available on the Internet at

<http://www.accesstojustice.org> and <http://www.seniorlegalhelpline.org>

Appalachian Research and Defense Fund of Kentucky, Inc. (APPALRED) serves low income clients and groups in 37 eastern and south central Appalachian counties through a network of ten (10) area offices and support office in Lexington. APPALRED's staff provides legal advice and representation to clients facing a full range of poverty law problems including family law, housing, public benefits, consumer issues, utility cut-offs, employment and education law. APPALRED has represented non-profit organizations which assist low income persons, such as spouse abuse shelters and housing development groups. For more information call Prestonsburg 606-886-3876; Richmond 859-624-1394; Barbourville 606-546-5115; Columbia 270-384-4707; Harlan 606-573-6301; Hazard 606-439-2315; Jackson 606-666-4941; Manchester 606-598-6188; Pikeville 606-432-2181; and Somerset 606-679-7313.

Central Kentucky Legal Services (CKLS) offers services to low income residents of Anderson, Bourbon, Boyle, Fayette, Franklin, Harrison, Jessamine, Mercer, Scott, and Woodford Counties. CKLS also offers services to seniors and prevention services to victims of domestic violence in those counties and also to residents of Clark, Estill, Garrard, Lincoln, Madison, Nicholas, and Powell Counties, with no means test. For more information call Lexington 859-233-4556 or 800-928-4556.

Cumberland Trace Legal Services (CTLS) has a mission to assist and enable low-income families as well as the elderly, disabled and other vulnerable individuals in South Central Kentucky to resolve legal problems that are a barrier to self-sufficiency, and to provide these individuals an opportunity for an improved quality of life. CTLS's Legal Assistance Program utilizes legal counsel and representation of low-income families, elderly, individuals and other disadvantaged people. Counties served include Allen, Barren, Butler, Edmonson, Green, Hart, Logan, Metcalfe, Simpson, Taylor, and Warren. For more information call Bowling Green 270-782-1924 or 800-782-1924; and Campbellsville 270-789-2366 or 800-780-2366. Further details are available on the Internet at <http://www.ctls.bowlinggreen.net>

Louisville Legal Aid Society (LAS) is a regional public interest law firm serving low-income and elderly clients in fifteen (15) counties that are a mix of urban, suburban and rural areas. The primary areas of practice are family law (mainly representing victims of domestic violence), landlord-tenant and home ownership defense, consumer, government benefits (SSI, K-TAP, food stamps, unemployment compensation, and access to health care issues), and community and economic development (through work with non-profit community groups). Counties served include Breckinridge, Bullitt, Grayson, Hardin, Henry, Jefferson, Larue, Marion, Meade, Nelson, Oldham, Shelby, Spencer, Trimble, and Washington Counties. For more information call Louisville 502-584-1254 or 800-292-1862.

Northern Kentucky Legal Aid Society covers 23 counties providing legal services for low-income individuals. Counties served include Bath, Boone, Bracken, Campbell, Carroll, Carter, Elliott, Fleming, Gallatin, Grant, Greenup, Kenton, Lewis, Mason, Menifee, Montgomery, Morgan, Nicholas, Owen, Pendleton, Robertson, and Rowan. For more information call Covington 859-431-8200 or 800-888-8189; Morehead 606-784-8921 or 800-274-5863; Ashland 606-329-1321 or 877-295-4137.

Western Kentucky Legal Services (WKLS) is a private non-profit Kentucky corporation serving the twenty-four (24) westernmost counties in Kentucky from four (4) offices. The goal of WKLS is to keep the courthouse doors open regardless of income, and ensure that justice is not rationed based on ability to pay. For more information call Madisonville 270-825-3801 or 800-467-2193; Hopkinsville 270-886-8227 or 800-960-8227; Owensboro 270-683-4585 or 800-467-2260; Paducah 270-442-5518 or 800-467-2218.

Further details are available on the Internet at <http://www.nlada.org> for the National Legal Aid and Defender Association, 1625 K Street NW, Suite 800, Washington, DC 20006, telephone 202-452-0620 or toll-free 888-668-6933.

Protection and Advocacy

Protection and Advocacy (P&A) is a state agency mandated by federal law to protect and advocate for the rights of individuals with disabilities. Protection and Advocacy protects and promotes the rights of Kentuckians with disabilities through individual and systemic advocacy and education. P&A receives federal funding from the following programs:

The Protection and Advocacy for Individuals with Developmental Disabilities (PADD) Program was created by the Developmental Disabilities Assistance and Bill of Rights (DD) Act of 1975. P&As are required by the Act to pursue legal, administrative, and other appropriate remedies to protect and advocate for the rights of individuals with developmental disabilities under all applicable federal and state laws.

The governor in each state designated an agency to be the P&A system and provided assurance that the system was and would remain independent. The Administration for Children and Families, Administration on Developmental Disabilities (ADD), administers the PADD program.

The DD Act requires that PADD clients meet the definition of developmental disabilities defined in the Act as chronic and attributable to a mental and/or physical impairment which must be evident prior to the age of twenty-two. They tend to be lifelong and result in substantial limitations in three or more of the major life areas: self-care, learning, mobility, economic self-sufficiency, receptive and expressive language, self-direction, and capacity for independent living.

The Protection and Advocacy for Individuals with Mental Illness (PAIMI) Program was established in 1986. Each state has a PAIMI program which receives funding from the National Center for Mental Health Services. Agencies are mandated to (1) protect and advocate for the rights of people with mental illness and (2) investigate reports of abuse and neglect in facilities

that care for or treat individuals with mental illness. The system designated to serve as the PADD program in each state and territory is also responsible for operating the PAIMI program. Substance Abuse and Mental Health Services Administration, Center for Mental Health Services (MHS), administers the PAIMI program.

Individuals eligible for PAIMI must have a significant mental illness or emotional impairment and reside in residential facilities. These facilities, which may be public or private, include hospitals, nursing homes, community facilities, homeless shelters, jails and prisons. PAIMI may address issues which arise during transportation or admission to, the time of residency in, or 90 days after discharge from such facilities.

The Protection and Advocacy for Individual Rights (PAIR) Program was established by Congress as a national program under the Rehabilitation Act in 1993. PAIR programs were established to protect and advocate for the legal and human rights of persons with disabilities.

Although PAIR is funded at a lower level than PADD and PAIMI, it represents an important component of a comprehensive system to advocate for the rights of all persons with disabilities. The system designated to serve as the PADD program in each state is also responsible for operating the PAIR program. The Office of Special Education And Rehabilitative Services, Rehabilitative Services Administration (RSA), administers PAIR.

Persons eligible for PAIR are individuals with disabilities who are not eligible for the PADD or PAIMI programs or whose issues do not fall within the jurisdiction of the Vocational Rehabilitation Protection and Advocacy called Client Assistance Program (CAP).

The Protection and Advocacy for Assistive Technology (PAAT) Program was created in 1994 when Congress expanded the Technology-Related Assistance for Individuals with Disabilities Act (Tech Act) to include funding for P&As to assist individuals with disabilities and their family members, guardians, advocates, and authorized representatives in securing assistive technology (AT).

Assistive Technology is any item, piece of equipment, or system that is used to increase, maintain, or improve the functional capabilities of a child or adult with a disability.

Office of Special Education and Rehabilitative Services, National Institute on Disability and Rehabilitation Research (NIDRR), administers PAAT.

Kentuckians seeking advocacy through PAAT may receive client-directed advocacy services if they have been denied assistive technology to which they were entitled. Goals also include systems change that will promote improved access to technology for Kentuckians.

P&As must focus on unserved or underserved populations. The need to prioritize is necessary as the demand for representation often exceeds the resources of the P&A system.

Once a call is received, P&A staff will review the information and determine if the client's case falls within one of the agency's priorities. If the case does not meet a priority, P&A will assist in an informal manner by providing information, referral and technical assistance.

P&A is a client-directed agency. Individuals shall grant authorization for P&A representation. For individuals with public guardians and children committed to the Cabinet for Families and Children authorization is guaranteed under the DD Act and current interagency agreements.

For more information, contact:

Protection and Advocacy Division

100 Fair Oaks Lane, Third Floor

Frankfort, KY 40601

(502) 564-2967, 1-800-372-2988 (toll-free & TTY), (502) 564-0848 (FAX)

P&A, an equal opportunity employer and advocacy provider, does not discriminate on the basis of disability, race, color, national origin, sex, religion or age. Further details are available on the Internet at <http://kypa.sky1.net>

Medicaid

Medicaid is a program for individuals and families, which pays for medical services provided by health care professionals who have entered into a participation agreement with the Department for Medicaid Services. Individuals or families with dependent children may be eligible for Medicaid if they meet the following requirements:

- A pregnant woman;
- A dependent child under age 19 (the child does not have to live with a parent or close relative in order to receive Medical Assistance);
- Parents (one or both) of a dependent child if one parent has left home, cannot work due to sickness or disability, or has died;
- Parents (both) living with a dependent child, if the parent who earned the most income in the last 24 months is unemployed.

An application for Medical Assistance may be filed at the local Department for Community Based Services Office. At the time of the application, an individual or family member should be advised to bring proof of:

- Social Security Number;
- Health Insurance
- Pregnancy (Doctor statement verifying pregnancy and expected due date of delivery), if applicable.
- Non-Pregnant parents should bring proof of resources (last 3 months bank statements, checking or savings account, life insurance policies, stocks and bonds), if they want Medicaid coverage for themselves.

Services covered under the State Medicaid Plan include:

Inpatient Hospital
Outpatient Hospital
Emergency Services
Outpatient Surgery
Physician, Nurse Practitioner, and Primary Care Services
Early and Periodic Screening, Diagnosis and Treatment (Well child care and Special services)
Preventive Services in Health Departments
Vision Care
Hearing Care
Dental Services
Family Planning Services
Pharmacy
Lab and X-ray
Home Health
Physical Therapy, Speech Therapy, and Occupational Therapy (limited settings)
Medical Equipment and Supplies
Transportation (emergency)
Renal Dialysis
Hospice
Nursing Home Care
Inpatient Mental Health Services
Outpatient Mental Health Services
Early intervention for infants and toddlers with disabilities
Services provided by school districts for children with disabilities

Further details are available on the Internet at <http://cfc-chs.chr.state.ky.us/chs/dms> or telephone 877-524-4718 for additional information

Medicare

The Medicare health insurance program provides acute care coverage for Social Security and Railroad Retirement beneficiaries age 65 and over, for persons entitled for 24 months to receive Social Security and Railroad Retirement disability benefits, and for certain persons with end-stage kidney disease.

The basic Medicare plan, available nationwide, is a fee-for-service arrangement, where the beneficiary may use any provider accepting Medicare; some services are not covered and there are some out-of-pocket costs.

Under “Medicare + Choice”, persons eligible for Medicare may have the option of getting services through a health maintenance organization (HMO) or other managed care plan. Any

such plan must provide at least the same benefits, except for hospice services, and may provide added benefits such as lower or no deductibles and coverage for some prescription drugs, but is usually subject to restrictions in choice of health care providers. In some plans services by outside providers are still covered for an extra out-of-pocket cost. Also available as options in some areas are Medicare-approved private fee-for-service plans and Medicare medical savings accounts.

Hospital insurance (Part A). The basic hospital insurance program pays covered services for hospital and post-hospital care including the following:

- All necessary inpatient hospital care for the first 60 days of each benefit period, except for a deductible. For days 61-90, Medicare pays for services over and above a coinsurance amount. After 90 days, the beneficiary has 60 reserve days for which Medicare helps pay.
- Up to 100 days' care in a skilled nursing facility in each benefit period. Hospital insurance pays for all covered services for the first 20 days; for the 21-100th day, the beneficiary pays coinsurance.
- Part-time home health care provided by nurses or other health workers.
- Limited coverage of hospice care for individuals certified to be terminally ill.

There is a premium for this insurance in certain cases

Medical insurance (Part B). Elderly persons can receive benefits under this supplementary program only if they sign up for them and agree to a monthly premium. The federal government pays the rest of the cost. The medical insurance program usually pays 80% of the approved amount (after the first \$100 in each calendar year) for the following services:

- Covered services received from a doctor in his or her office, in a hospital, in a skilled nursing facility, at home, or in other locations.
- Medical and surgical services, including anesthesia.
- Diagnostic tests and procedures that are part of the patient's treatment.
- Radiology and pathology services by doctors while the individual is in a hospital inpatient or outpatient.
- Other services such as X-rays, services of a doctor's office nurse, drugs and biologicals that cannot be self-administered, transfusions of blood and blood components, medical supplies, physical/occupational therapy and speech pathology services.

In addition to the above, certain other tests or preventative measures are now covered without an additional premium. These include mammograms, bone mass measurement, colo-rectal cancer screening, and flu shots. Outpatient prescription drugs are generally not covered under the basic plan, nor are routine physical exams, dental care, hearing aids, or routine eye care. There is limited coverage for non-hospital treatment of mental illness.

Further details are available on the Internet at <http://www.medicare.gov> or by calling 800-638-6833.

Sexual and Domestic Violence Program

The Sexual and Domestic Violence Program in the Department for Mental Health and Mental Retardation Services provides statewide oversight of 13 Rape Crisis Centers (located in Paducah, Hopkinsville, Owensboro, Bowling Green, Louisville, Covington, Ashland, Prestonsburg, Hazard, Corbin, Somerset, and Lexington), Sexual Abuse Programs, Offender Treatment Programs, and Domestic Violence Programs.

Further details are available on the Internet at <http://dmhmrs.chr.state.ky.us/sexdomes/> or call 502-564-7610 or 800-374-9146. Additional information is available on the Internet at <http://www.kdva.org> regarding the Kentucky Domestic Violence Association.

Kentucky Association of Sexual Assault Programs, Inc.
Association
PO Box 602
Frankfort, KY 40602
502-226-2704

Kentucky Domestic Violence

PO Box 356
Frankfort, KY 40602
502-695-2444

Rape Crisis Centers and Outreach Centers

Domestic Violence Shelters

Paducah	270-534-4422 or 800-928-7273	270-443-6282
Murray	270-753-5777	
Hopkinsville	270-885-4572 or 800-766-0000	270-885-4572
Madisonville	270-825-9737	
Cadiz	270-522-9505	
Owensboro	270-926-7278 or 800-226-7273	270-685-0260
Henderson	270-826-7273 or 800-226-7273	
Hartford	270-298-4484 or 800-226-7273	
Bowling Green	270-782-5014 or 800-347-1848	270-781-9334
Glasgow	270-651-8378 or 800-347-1848	
Morgantown	270-526-3290 or 800-347-1848	
Franklin	270-598-8100 or 800-347-1848	
Elizabethtown	270-769-1304	270-765-4057
Louisville	502-581-7200 or 502-581-7273	502-581-7222
Louisville (West)	502-775-6408	
Shelbyville	502-633-7800	
Mt. Washington	502-538-0212	
Covington	859-491-3335 or 800-928-3335	859-491-3335
Maysville	606-564-6708 or 800-928-6708	606-564-6708
Florence	859-647-2388 or 859-491-3335	
Williamstown	859-824-7697	
Carrolton	502-732-0101	
Ashland	606-324-1141 or 800-562-8909	606-329-9304
Hazard	606-436-5761 or 800-375-7273	606-439-1552
Corbin	606-528-7010	

Rape Crisis Centers and Outreach Centers

Barbourville	606-546-3104
Benham	606-848-5444
Harlan	606-573-1624
London	606-864-2104
Manchester	606-598-5172
McKee	606-287-7137
Mt Vernon	606-256-2129
Middlesboro	606-248-4949
Pineville	606-337-6137
Williamsburg	606-549-1440
Somerset	606-679-4782 or 800-656-4673
Lexington	859-253-2511 or 800-656-4673
Cynthiana	606-234-1011 or 800-656-4673
Frankfort	502-226-1400 or 800-656-4673
Richmond	859-625-0213 or 800-656-4673
Danville	606-236-4445 or 800-656-4673
Georgetown	502-863-7350 or 800-656-4673
Winchester	606-744-3002 or 800-656-4673
Nicholasville	859-881-5110 or 800-656-4673
Prestonsburg	606-886-8572 or 800-422-1060
Paintsville	606-789-3518
Pikeville	606-432-3143
So. Williamson	606-237-9871
Inez	606-298-7902
Salyersville	606-349-3115
Morehead	606-784-4161 or 800-562-8909
Resurrection Home (Lee and Owsley)	
The Caring Place (Washington, Marion, Nelson)	
Safe Place (Pike)	

Domestic Violence Shelters

606-256-2724
606-679-1553
859-233-9927
606-285-9079
606-784-6880
800-928-4638 or 606-464-8481
800-692-9394 or 270-692-9300
800-292-7840 or 606-437-9587

Social Security

Social Security benefits are based on a worker's primary insurance amount (PIA), which is related by law to the average indexed monthly earnings (AIME) on which Social Security contributions have been paid. The full PIA is payable to a retired worker who becomes entitled to benefits at age 65 and to an entitled disabled worker at any age. Spouses and children of retired or disabled workers and survivors of deceased workers receive set proportions of the PIA subject to a family maximum amount.

A worker who becomes so disabled as to be unable to work may be eligible for a monthly disability benefit. Benefits continue until it is determined that the individual is no longer disabled. When a disabled-worker beneficiary reaches age 65, the disability benefit becomes a retired-worker benefit.

Further details are available on the Internet at <http://www.ssa.gov> or telephone 1-800-772-1213.

Social Security Administration offices are located in the following communities:

Ashland	606-324-0516
Bowling Green	270-842-5691
Campbellsville	270-465-4164
Corbin	606-528-1806
Danville	859-236-3934
Elizabethtown	270-769-2410
Florence	859-282-7324 or 859-282-7432 (TDD)
Frankfort	502-875-2233
Harlan	606-573-6101
Hazard	606-439-1351
Henderson	270-826-4451
Hopkinsville	270-886-3855
Jackson	606-666-2462
Lexington	859-294-5633
Louisville	502-582-6690 or 502-775-5709 or 502-244-0593
Madisonville	270-825-9125
Mayfield	270-247-8095
Maysville	606-564-9987
Middlesboro	606-248-1527
Owensboro	270-685-3931
Paducah	270-443-7506
Pikeville	606-432-2177
Prestonsburg	606-886-8525
Richmond	859-624-5714
Somerset	606-678-0825

Transportation

The Kentucky Transportation Cabinet coordinates the provision of transportation services for the citizens of the Commonwealth with Federal, state and local government agencies and transportation providers. The following description contains information regarding three (3) programs coordinated by the Transportation Cabinet: Human Services Transportation Delivery Program, Fixed Route and Paratransit, and Demand Response Public Transportation.

The **Human Services Transportation Delivery Program** provides accessible transportation in all areas of Kentucky. By combining resources of several state government agencies, private providers and public sector providers this network provides efficient, appropriate and cost-effective transportation services. This project is a joint venture of the Kentucky Transportation Cabinet, Cabinet for Families and Children, Cabinet for Health Services, and the Workforce Development Cabinet. The Network provides simplified trip scheduling by telephone; safe and reliable vehicles; and alcohol and drug tested drivers that are trained in passenger assistance and first aid.

Eligibility

Temporary Assistance to Needy Families, Medicaid, Department for the Blind, and Vocational Rehabilitation recipients are eligible for transportation by the Human Services Delivery Program. Each rider needing to schedule transportation services should contact the regional broker Monday through Friday between the hours of 6:00 a.m. and 8:00 p.m. and Saturday from 8:00 am. to 1:00 p.m. local time. After hours paging is available, including Sundays and state holidays, for immediate or “urgent care” transportation. Riders are asked to schedule trips at least 72 hours in advance. Any cancellations of appointments are made through the regional brokers.

Contact

Contact the regional brokers listed below for information regarding the Human Services Delivery Program or the Customer Service Hotline 1-888-941-7433 for any questions, problems, or comments. The Kentucky Relay Service enables the hearing or speech-impaired and deaf persons to call after hours or on the weekends and conveniently communicate transportation needs to the appropriate regional broker. TDD users: 1-800-648-6056, Voice users: 1-800-648-6057. Further details are available on the Internet at http://www.kytc.ky.us/empower/Human_Services.htm

Kentucky Regional Transportation Brokers

Paducah Area Transit System

PO Box 2267

Paducah, KY 42002

Phone 270-444-8559

Toll-free 877-828-7287

Serving the following counties: Ballard, Calloway, Carlisle, Fulton, Graves, Hickman, McCracken, and Marshall

Pennyrite Allied Community Services

PO Box 582

Hopkinsville, KY 42240

Phone 270-886-6641

Toll-free 800-467-4601

Serving the following counties: Caldwell, Christian, Crittenden, Hopkins, Livingston, Lyon, Muhlenburg, Todd, and Trigg

Audubon Area Community Services

PO Box 20004

Owensboro, KY 42304

Phone 270-684-7715

Toll-free 800-816-3511

Serving the following counties: Daviess, Hancock, Henderson, McLean, Ohio, Union, and Webster

Transportation Management System

PO Box 20111

Bowling Green, KY 42102

Phone 270-230-1234

Toll-free 888-397-8747

Serving the following counties: Breckinridge, Grayson, Hardin, Larue, Marion, Meade, and Nelson

Region 5, LLC

PO Box 368

Bowling Green, KY

Phone 270-843-9431

Toll-free 800-599-8616

Serving the following counties: Adair, Allen, Barren, Butler, Edmonson, Green, Hart, Logan, Metcalfe, Simpson, Taylor, and Warren

Passport (Non-emergency Medical Transportation for Medicaid recipients only)

305 West Broadway

Louisville, KY 40202

Phone 502-585-7900

Toll-free 800-485-6531

Serving the following county: Jefferson

Yellow Transportation Management

PO Box 2107

Louisville, KY 40201

Phone 502-637-9260

Toll-free 800-483-8772

Serving the following counties: Bullitt, Jefferson (non-Medicaid), Oldham, Shelby, and Spencer

Bluegrass Community Action

3445 B Versailles Road

Frankfort, KY 40601

Phone 502-695-4290

Toll-free 800-456-6588

Serving the following counties: Anderson, Boyle, Casey, Franklin, Garrard, Jessamine, Lincoln, Mercer, Scott, Washington, and Woodford

Region 9, LLC

629 York Street

Newport, KY 41071

Phone 859-261-9998

Toll-free 888-466-9998

Serving the following counties: Boone, Campbell, Carroll, Gallatin, Grant, Henry, Kenton, Owen, Pendleton, and Trimble

Federated Transportation Services of the Bluegrass

694 New Circle Road NE, Suite 32

Lexington, KY 40505

Phone 859-233-0066

Toll-free 888-848-0989

Serving the following county: Fayette

Kentucky River Foothills

PO Box 743

Richmond, KY 40475

Phone 606-624-3236

Toll-free 800-221-3883

Serving the following counties: Bourbon, Clark, Estill, Harrison, Madison, Montgomery, Nicholas, and Powell

Rural Transit Enterprises Coordinated

PO Box 746

Mount Vernon, KY 40456

Phone 606-256-9835

Toll-free 800-321-7832

Serving the following counties: Bell, Clinton, Cumberland, Knox, Laurel, McCreary, Monroe, Pulaski, Rockcastle, Russell, Wayne, and Whitley

LKLP Community Action

PO Box 340

Jeff, KY 41754

Phone 606-439-1362

Toll-free 800-245-2826

Serving the following counties: Breathitt, Clay, Harlan, Jackson, Knott, Lee, Leslie, Letcher, Owsley, Perry, and Wolfe

Sandy Valley Transportation Services

81 Resource Court

Prestonsburg, KY 41653

Phone 606-886-1936

Toll-free 800-444-7433

Serving the following counties: Floyd, Johnson, Magoffin, Martin, and Pike

Community Action Council

118 East Main Street

Morehead, KY 40351

Phone 606-780-4714

Toll-free 888-891-7433

Serving the following counties: Bath, Boyd, Carter, Elliott, Greenup, Lawrence, Menifee, Morgan, and Rowan

Licking Valley Community Action

203 High Street

Flemingsburg, KY 41041

Phone 606-845-0081

Toll-free 800-803-1310

Serving the following counties: Bracken, Fleming, Lewis, Mason, and Robertson

Fixed Route and Paratransit

Each public entity that operates non-commuter fixed route transportation services is required by the Americans with Disabilities Act (ADA) to provide complementary Paratransit services for individuals unable to use the fixed system. The Americans with Disabilities Act is a Federal law that guarantees specially certified disabled Americans full and equal access to the same services and accommodations that are available to people without disabilities. Federal regulation requires

public entities operating fixed route bus system to provide complementary transit service to ADA eligible disabled persons within corridors within a width of three-fourths (3/4) of a mile on each side of the fixed route. Each public entity has a certification process to determine eligibility for Paratransit services in accordance with Federal regulations.

Eligibility

To qualify for Paratransit services the applicant must meet one of the eligibility categories as defined by the Americans with Disabilities Act (ADA).

1. Any person unable because of a disability to board, ride, or disembark from an accessible fixed-route bus.
2. Any person with a disability who is capable of using an accessible bus, but the desired trip cannot be made because a portion of the fixed-route service is not yet accessible: for example, there may not be a curb cut at the bus stop or the lift cannot accommodate a particular wheelchair of a common type.
3. Any person with a disability who has a specific impairment which prevents travel to or from a bus stop.

To apply for Paratransit service call the telephone number listed for the public transportation provider in your area. The following public transportation entities provide fixed route transportation and Paratransit Services in Kentucky:

Transit Authority of River City (TARC) serving Jefferson, Bullitt and Oldham Counties 502-561-5217 or 502-561-5240 (TDD)

Transit Authority of Lexington-Fayette County Government (LexTran) serving Fayette County and Express route from Nicholasville to Fayette County 859-233-3433 (Red Cross Wheels)

Transit Authority of Northern Kentucky (TANK) serving Boone, Campbell, and Kenton Counties 859-331-8265

Owensboro Transit System serving the City of Owensboro 270-687-8570

Paducah Transit Authority serving the City of Paducah-McCracken County with operating authority in Ballard, Marshall, Graves and Livingston Counties 270-444-8700

Ashland Bus System serving Boyd County 606-327-2025

Barren River Local Officials Organization serving Allen, Barren, Butler, Edmonson, Hart, Logan, Metcalfe, Monroe, Simpson, and Warren Counties 270-781-2381 (60 and older)

Henderson Area Rapid Transit (HART) serving the City of Henderson 270-831-1249

Frankfort Transit serving the City of Frankfort 502-875-8565

Transit Authority of Central Kentucky (TACK) serving Breckinridge, Grayson, Hardin, Larue, Marion, Meade, and Nelson Counties 270-692-2136

Community Action Council for Lexington-Fayette, Bourbon, Harrison, and Nicholas Counties (CATS) serving Bourbon, Harrison, and Nicholas Counties 859-289-7172 or 800-548-2287

Maysville Transit System serving the City of Maysville and Buffalo Trace Area Development District (Bracken, Fleming, Lewis, Mason, and Robertson Counties) 606-759-5835

Murray-Calloway County Transit Authority serving Calloway County 270-753-9725

Demand Response Public Transit

There are several other transportation providers that do not provide fixed route services and are therefore exempt from the Paratransit provision of the Americans with Disabilities Act. They provide more flexible pick-up and delivery routes. These include the following:

American Red Cross Bluegrass Chapter Wheels serving Fayette County 859-233-3433

American Red Cross Louisville Chapter Wheels serving Jefferson, Bullitt, Shelby, Spencer, Oldham, Henry, and Trimble Counties 502-561-3690

Green River Intra-County Transit System (GRITS) serving Daviess, Hancock, Henderson, Ohio, McLean, Union, and Webster Counties 270-686-1619

Bluegrass Ultra-Transit Service (BUS) serving Anderson, Boyle, Casey, Franklin, Garrard, Jessamine, Lincoln, Mercer, Scott, Washington, and Woodford Counties 502-695-7216

Community Action Transit System (CATS) serving Bath, Bourbon, Harrison, Menifee, Montgomery, Morgan, Rowan, and Nicholas Counties 859-289-7172

Cumberland Valley Area Development District serving Bell, Breathitt, Clay, Floyd, Harlan, Jackson, Johnson, Knox, Laurel, Lee, Magoffin, Martin, Owsley, Pike, Rockcastle, Whitley and Wolfe Counties 606-878-7361

Daniel Boone Development Council serving Clay, Jackson, Lee, Owsley, Breathitt, and Wolfe Counties 606-598-5127

Federated Transportation Services of the Bluegrass serving Anderson, Bath, Bourbon, Boyle, Breckinridge, Clark, Estill, Fayette, Franklin, Garrard, Hardin, Harrison, Jessamine, Larue, Lincoln, Madison, Marion, Meade, Menifee, Mercer, Montgomery, Morgan, Nelson, Nicholas, Powell, Rowan, Scott, Washington, and Woodford Counties 859-233-0066

Northeast Kentucky Area Development Council serving Boyd, Carter, Elliott, Lawrence, and Greenup Counties 606-739-5191

Fulton Transit Authority serving Fulton, Hickman, Carlisle, and Graves Counties 270-472-0662

Glasgow Transit serving the City of Glasgow 606-651-5977

Harlan County Public Transit serving Harlan County 606-573-5330 or toll-free 800-262-8594

Foothills Express serving Clark, Estill, Madison, and Powell Counties 606-624-3236 or toll-free 800-221-3883

LKLP Transportation serving Leslie, Knott, Letcher, and Perry Counties 606-436-8853 or toll-free 800-245-2826

Lake Cumberland Community Service Organization serving Adair, Casey, Clinton, Cumberland, Green, McCreary, Pulaski, Russell, Taylor and Wayne Counties 270-343-5800 or toll-free 800-928-6382

Licking Valley Community Action Program serving Bracken, Fleming, Mason, Lewis, and Robertson Counties 606-849-9651 or toll-free 800-803-1310

Middle Kentucky River Area Development Council serving Breathitt, Lee, Owsley, and Wolfe Counties 606-666-2452

Morehead Area Transit serving the City of Morehead 606-784-8505

Northern Kentucky Transit serving Boone, Carroll, Campbell, Gallatin, Grant, Kenton, Owen, and Pendleton Counties 859-371-0569

Pennyrile Allied Community Services serving Caldwell, Christian, Crittenden, Hopkins, Livingston, Lyon, Muhlenberg, Todd, and Trigg Counties 270-886-7999 or toll-free 800-264-0643

Purchase Area Development District serving Hickman, Marshall, McCracken, Ballard, Calloway, Carlisle, Fulton, and Graves Counties 270-247-7171

Rural Transit Enterprises Coordinated serving Bell, Clinton, Cumberland, Knox, Laurel, McCreary, Monroe, Pulaski, Rockcastle, Russell, Wayne, and Whitley Counties 606-256-9835

Sandy Valley Transportation Services serving Floyd, Johnson, Magoffin, Martin, and Pike Counties 606-886-1936 or toll-free 800-444-7433

Senior Services of Northern Kentucky serving Boone, Campbell, Carroll, Gallatin, Grant, Kenton, Owen, and Pendleton Counties 859-491-0522 or toll-free 800-255-7265

Southern Kentucky Community Action Regional Transit serving Allen, Barren, Butler, Edmonson, Hart, Logan, Metcalfe, Monroe, Simpson, and Warren Counties 270-782-3162

Phone Numbers and Web Sites listed in the Acquired Brain Injury Resource Guide

Access to Justice Foundation
859-255-9913

<http://www.accesstojustice.org>
<http://www.seniorlegalhelpline.org>

Acquired Brain Injury (ABI)
Waiver Program
800-374-9146 or 502-564-3615

<http://dmhmrs.chr.state.ky.us/braininjury/abi.htm>

Adult Mental Health Services (AMH)
800-374-9146 or 502-564-4448

<http://dmhmrs.chr.state.ky.us/adultservices/>

Brain Injury Association of Kentucky (BIAK)
800-592-1117 or 502-493-0609

<http://www.braincenter.org/>

Carl D. Perkins Rehabilitation
Center
800-443-2187 or 606-789-1440

http://kydvr.state.ky.us/programs_services/cdpcrc.htm

Children's Mental Health Services (CMH)
800-374-9146 or 502-564-7610

<http://dmhmrs.chr.state.ky.us/cysb>

Commission for Children
with Special Health
Care Needs (CCSHCN)
800-232-1160 or 502-595-4459

<http://cfc-chs.chr.state.ky.us/chs/cwshcn/info.htm>

Department for the Blind (Blind)
800-346-2115 or 502-327-6010

<http://kyblind.state.ky.us>

Department of Vocational Rehabilitation
(VocReh)
800-372-7172 or 502-564-4440

<http://kydvr.state.ky.us>

Domestic Violence
800-374-9146 or 502-564-7610

<http://dmhmrs.chr.state.ky.us/sexdomes/>

Food Stamps
502-564-7536

<http://cfc-chs.chr.state.ky.us/cfc>

Habitat for Humanity
229-924-6935 extension 2551

<http://www.habitat.org>

Home and Community-based Waiver (H&C)
877-524-4718 or 502-564-5707

<http://cfc-chs.chr.state.ky.us/chs/dms>

IMPACT Plus 800-374-9146 or 502-564-7610	http://dmhmrs.chr.state.ky.us/cysb/impact.htm
Kentucky Assistive Technology Services Network (KATSN) 800-327-5287 or 502-327-0022	http://www.katsnet.org
Kentucky Children's Health Insurance Program (KCHIP) 877-524-4718 or 502-564-6890	http://cfc-chs.chr.state.ky.us/chs/kchip/kchip.htm
Kentucky Commission on the Deaf and Hard of Hearing 800-372-2907 or 502-573-2604	http://state.ky.us/agencies/kcdhh/home/agency.htm
Kentucky Domestic Violence Association 502-695-2444	http://kdva.org
Kentucky Housing Corporation 800-633-8896 or 502-564-7630	http://www.kyhousing.org
Kentucky Interagency Mobilization for Progress in Adolescent and Children's Treatment (IMPACT) 800-374-9146 or 502-564-7610	http://dmhmrs.chr.state.ky.us/cysb/impact.htm
Medicaid 877-524-4718 or 502-564-4321	http://cfc-chs.chr.state.ky.us/chs/dms
Medicare 800-638-6833	http://www.medicare.gov
Mothers Against Drunk Driving (MADD) 800-944-6233 or 859-734-0090	http://madd.org
National Legal Aid and Defender Association 888-668-6933 or 202-452-0620	http://www.nlada.org
Protection and Advocacy 800-372-2988 or 502-564-8006	http://kypa.sky1.net
Social Security 800-772-1213	http://www.ssa.gov

Substance Abuse Program (SA)
502-564-2880

<http://dmhmrs.chr.state.ky.us/sa>

Supported Living Program (SupLiv)
502-564-7702

<http://dmhmrs.chr.state.ky.us/supportedliving/>

Supports for Community Living (SCL)
502-564-7702

<http://dmhmrs.chr.state.ky.us/scl/>

Transportation
502-564-7433

http://www.kytc.ky.us/empower/Human_Services.htm

Traumatic Brain Injury
(TBI) Trust Fund
Benefit Program
877-722-2288 or 502-564-3615

<http://dmhmrs.chr.state.ky.us/braininjury/tbi.htm>

Please note that the following programs do not have a web page listed on the Internet at this time:

Crime Victims Compensation Board
800-469-2120 or 502-573-2290

ESPDT
800-635-2570 or 502-564-6890

First Steps
800-442-0087 or 502-564-7722

Homecare
502-564-6930

IMPACT
800-374-9146 or 502-564-7610

Personal Care Attendant
502-564-6930

Resource Assessment Interview Format

The following are several questions that will be answered during the key informant interviews.

1. What services does your program provide and/or financially support that may benefit persons with brain injury?
2. How is each of these services defined?
3. What are the eligibility criteria for each of the services (including target population)?
4. Who is excluded from services?
5. What are the average length of stay and maximum benefits?
6. What is the estimated length of time prior to accessing services?
7. What is the estimated number of persons on a waiting list?
8. What are the circumstances for moving a person up to the front of the waiting list?
9. What is the statewide availability of services in Kentucky? (Number of providers statewide)
10. What are the discharge criteria?
11. What would a family member (of an individual with brain injury seeking services under your program) need to know in order to access services in the most efficient manner?
12. Any additional comments?

Information obtained from the face to face and/or telephone interviews will be summarized and displayed in the Acquired Brain Injury Resource Assessment document due to Dr. Colleen Ryall, Director, Brain Injury Services Unit, Department for Mental Health and Mental Retardation Services by April 30, 2000. Efforts will be made to verify summary information with key informants via phone call, e-mail or fax prior to it being published in the resource assessment document.